

**LOBBYIST
ANNUAL STATEMENT OF EXPENDITURES**

AUTHORITY: COOPER CITY CODE OF ORDINANCES SECTION 2-233

NAME: BENINATE, Victor, H.
(LOBBYIST) (Please PRINT - Last name, first name, M.I.)

COMPANY: AT&T

MAILING ADDRESS: 2856 NE 24 CT
FONT LAUDERDALE, FL 33305

TELEPHONE: CELL- 954-801-4623

For the Period from January 1, 2017 through December 31, 2017.

This form shall be filed by 5:00 p.m., January 15, 2018.

Forms not postmarked by Midnight, January 15, 2018 may be subject to a fine of \$50.00 for each late day.

Lobbying expenditures shall not include personal expenses for lodging, meals and travel.

Statement shall be filed even if there have been no expenditures during a reported period.

(NOTE: Use additional pages if necessary.)

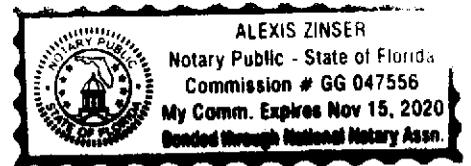
EXPENDITURES

Purpose of Expenditure	Source of Funds	Amount
<p align="center"><i>NONE</i></p>		

I do solemnly swear or affirm that all the foregoing facts are true and correct and that I have read Section 2-233 of the Cooper City Code of Ordinances, and that I am aware of the requirement for periodic filing and submission of other statements.

Alexis Zinser
Signature

STATE OF Florida
COUNTY OF Broward



Sworn and subscribed to before me this 19 day of December 2017.

Alexis Zinser
Notary or Deputy Secretary/Clerk

**LOBBYIST
ANNUAL STATEMENT OF EXPENDITURES**

AUTHORITY: COOPER CITY CODE OF ORDINANCES SECTION 2-233

NAME: WOOLEY, EDWARD
(LOBBYIST) (Please PRINT Last name, first name, M.I.)

COMPANY: Self

MAILING ADDRESS: 11038 Nashville Drive
Cooper City, Florida 33026

TELEPHONE: 954-483-8406

For the Period from January 1, 2017 through December 31, 2017.

This form shall be filed by 5:00 p.m., January 15, 2018.

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Statement shall be filed even if there have been no expenditures during a reported period.

(NOTE: Use additional pages if necessary.)

EXPENDITURES None

Purpose of Expenditure	Source of Funds	Amount

I do solemnly swear or affirm that all the foregoing facts are true and correct and that I have read Section 2-233 of the Cooper City Code of Ordinances, and that I am aware of the requirement for periodic filing and submission of other statements.

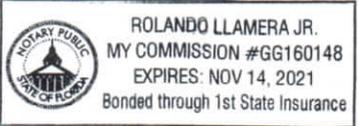
Carl E. Wooley
Signature

STATE OF FLORIDA

COUNTY OF BROWARD

Sworn and subscribed to before me this 5 day of JANUARY 20 18.

[Signature]
Notary or Deputy Secretary/Clerk



**LOBBYIST
ANNUAL STATEMENT OF EXPENDITURES**

AUTHORITY: COOPER CITY CODE OF ORDINANCES SECTION 2-233

NAME: Pace, Luigi
(LOBBYIST) (Please PRINT - Last name, first name, M.I.)

COMPANY: Waste Management Inc. of Florida

MAILING ADDRESS: 2380 College Ave. Davie, FL 33317

TELEPHONE: 954-991-5089

For the Period from January 1, 2017 through December 31, 2017.

This form shall be filed by 5:00 p.m., January 15, 2018.

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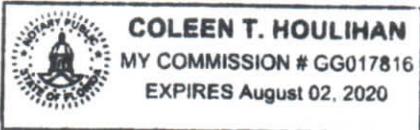
(NOTE: Use additional pages if necessary.)

EXPENDITURES

Purpose of Expenditure	Source of Funds	Amount
NONE		

I do solemnly swear or affirm that all the foregoing facts are true and correct and that I have read Section 2-233 of the Cooper City Code of Ordinances, and that I am aware of the requirement for periodic filing and submission of other statements.

[Signature]
Signature
STATE OF Florida
COUNTY OF Broward



Sworn and subscribed to before me this 10 day of January 2018.

[Signature]
Notary or Deputy Secretary/Clerk

**LOBBYIST
ANNUAL STATEMENT OF EXPENDITURES**

AUTHORITY: COOPER CITY CODE OF ORDINANCES SECTION 2-233

NAME: Mele, Dennis D
(LOBBYIST) (Please PRINT - Last name, first name, M.I.)

COMPANY: Granspoon Marder, LLP

MAILING ADDRESS: 200 E. Broward Blvd.
Fort Lauderdale, FL 33301

TELEPHONE: 954-527-2409

For the Period from January 1, 2017 through December 31, 2017.

This form shall be filed by 5:00 p.m., January 15, 2018.

Forms not postmarked by Midnight, January 15, 2018 may be subject to a fine of \$50.00 for each late day.

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Statement shall be filed even if there have been no expenditures during a reported period.

(NOTE: Use additional pages if necessary.)

EXPENDITURES

Purpose of Expenditure	Source of Funds	Amount
<u>None</u>		

I do solemnly swear or affirm that all the foregoing facts are true and correct and that I have read Section 2-233 of the Cooper City Code of Ordinances, and that I am aware of the requirement for periodic filing and submission of other statements.

[Signature]
Signature

STATE OF Florida

COUNTY OF Broward

Sworn and subscribed to before me this 12 day of January 20 18.

[Signature]
Notary or Deputy Secretary/Clerk



**LOBBYIST
ANNUAL STATEMENT OF EXPENDITURES**

AUTHORITY: COOPER CITY CODE OF ORDINANCES SECTION 2-233

NAME: Ericks, Candice D
(LOBBYIST) (Please PRINT - Last name, first name, M.I.)

COMPANY: Ericks Advocacy Group

MAILING ADDRESS: P. O. Box 10131 *formerly 333 N New River Dr E*
Tallahassee, FL 32302 *Suite 2000B*
Ft Lauderdale, Fl 33301

TELEPHONE: 954-648-1204

For the Period from January 1, 2017 through December 31, 2017.

This form shall be filed by 5:00 p.m., January 15, 2018.

Forms not postmarked by Midnight, January 15, 2018 may be subject to a fine of \$50.00 for each late day.

Lobbying expenditures shall not include personal expenses for lodging, meals and travel.

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(NOTE: Use additional pages if necessary.)

EXPENDITURES

Purpose of Expenditure	Source of Funds	Amount
N/A	N/A	N/A

I do solemnly swear or affirm that all the foregoing facts are true and correct and that I have read Section 2-233 of the Cooper City Code of Ordinances, and that I am aware of the requirement for periodic filing and submission of other statements.

[Handwritten Signature]
Signature

STATE OF FLORIDA

COUNTY OF LEON

Sworn and subscribed to before me this 12th day of JANUARY 2018.

[Handwritten Signature]
Notary or Deputy Secretary/Clerk



**LOBBYIST
ANNUAL STATEMENT OF EXPENDITURES**

AUTHORITY: COOPER CITY CODE OF ORDINANCES SECTION 2-233

NAME: Lewis, Alicia, J.
(LOBBYIST) (Please PRINT - Last name, first name, M.I.)

COMPANY: Greenspoon Marder, P.A.

MAILING ADDRESS: 200 E Broward Blvd, Suite 1800
Ft. Lauderdale, Florida 33301

TELEPHONE: 954-527-6276

For the Period from January 1, 2016 through December 31, 2016.

This form shall be filed by 5:00 p.m., January 15, 2017.

Forms not postmarked by Midnight, January 15, 2017 may be subject to a fine of \$50.00 for each late day.

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Statement shall be filed even if there have been no expenditures during a reported period.

(NOTE: Use additional pages if necessary.)

EXPENDITURES

Purpose of Expenditure	Source of Funds	Amount
None	N/A	N/A

I do solemnly swear or affirm that all the foregoing facts are true and correct and that I have read Section 2-233 of the Cooper City Code of Ordinances, and that I am aware of the requirement for periodic filing and submission of other statements.

Alicia J. Lewis
Signature

STATE OF Florida
COUNTY OF Broward

Sworn and subscribed to before me this 19 day of December 2017.

J. Fletcher
Notary or Deputy Secretary/Clerk



Jodi-Anne Fletcher
Commission # GG160449
Expires: November 14, 2021
Bonded thru Aaron Notary

Ana Iglesias

From: Kathryn Sims <KSims@coopercityfl.org>
Sent: Monday, December 18, 2017 3:21 PM
Cc: Jenna Montoya
Subject: Annual Statement of Expenditures
Attachments: Lobbyist Statement of Expenditures EForm 2017.pdf

Good Afternoon,

Please complete the attached Annual Statement of Expenditures and mail them to my attention at the address in my signature. The statements are due no later than January 15, 2018 to avoid a penalty of \$50/day thereafter.

Thank you,
Kathryn sims

Kathryn Sims
City Clerk/Director of Administrative Services
City of Cooper City
P.O. Box 290910 / 9090 S.W. 50th Place
Cooper City, Florida 33329-0910
Ph: 954-434-4300 x291 / Fax: 954-372-4251
ksims@coopercityfl.org



Please note that Florida has a broad public records law, and that all correspondence to me via email may be subject to disclosure.

**LOBBYIST
ANNUAL STATEMENT OF EXPENDITURES**

AUTHORITY: COOPER CITY CODE OF ORDINANCES SECTION 2-233

NAME: Zander, Stephanie Grutman
(LOBBYIST) (Please PRINT - Last name, first name, M.I.)

COMPANY: Ballard Partners

MAILING ADDRESS: 401 E. Las Olas, SU 1400
Ft. Lauderdale, FL 33301

TELEPHONE: 954-817-8007

For the Period from January 1, 2017 through December 31, 2017.

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(NOTE: Use additional pages if necessary.)

EXPENDITURES

Purpose of Expenditure	Source of Funds	Amount
NONE		0

I do solemnly swear or affirm that all the foregoing facts are true and correct and that I have read Section 2-233 of the Cooper City Code of Ordinances, and that I am aware of the requirement for periodic filing and submission of other statements.

[Signature]
Signature

STATE OF FLORIDA

COUNTY OF LEON

Sworn and subscribed to before me this 22 day of JANUARY 2018

[Signature]
Notary or Deputy Secretary/Clerk

