

IS THIS AN AMENDMENT OF A PREVIOUSLY FILED REGISTRATION?

Yes

No

IF YES, THIS FORM MUST STILL BE COMPLETELY FILLED OUT, AND A SEPARATE FILING FEE PAID.

Motley Susan P.
Name of Lobbyist (Last) (First) (M.I.)

Greenspoon Marder, P.A.
100 W. Cypress Creek Road Ft. Lauderdale, FL 33309
Business Name and Address (Number and Street) (City) (State) (Zip Code)

2360 N.E. 28 Street, Lighthouse Point FL 33064
Residence Address (Number and Street) (City) (State) (Zip Code)

954-527-2412 954-333-4012 Susan.Motley@gmlaw.com
Telephone Number: Fax Number: Email:

I. Lobbyist Retained by:

Dr. Umit Yigit, DMD + Sera Odabas-Yigit
Name of Principal/Client:

1347 E. Sample Road, Pompano Beach, FL 33064
Business Name and Address (Number and Street) (City) (State) (Zip Code)

954-245-0352 - umit@comcast.net
Telephone Number: Fax Number: Email:

Dental Practice
Nature of Business

Fill out this section, if principal is a Corporation, Partnership, or Trust

*Name of Chief Officer, Partner, or Beneficiary:

Umit Yigit

*Identify all persons holding, directly or indirectly, a 5% or more ownership interest in such corporation, partnership or trust:

II. General and specific subject matter of Lobby Issue(s).

Variences and site plan approvals for renovated building

III. Specify the extent of any direct business association by the lobbyist with any current elected or appointed official or employee of the City of Lighthouse Point. For the purposes of this Article, the term "direct business association" shall mean any mutual endeavor undertaken for profit or compensation.

None

IV. A lobbyist representing a group, association, or organization shall, prior to engaging in lobbying, receive appropriate authorization from said group, association, or organization to lobby on its behalf upon a particular subject matter. Please provide a copy of the applicable minutes, motion, or other documentation of action.

N/A

V. City Agencies/Individuals to be lobbied:

A. Full Name(s) of Individual/Title(s):

City Commissioners Mayor, Planning and Zoning Board members, City Administrator

B. Any Financial, Familial or Professional Relationship with anyone listed in subpart V

(A):

N/A

VI. Disclosure of terms and amounts of lobbyist compensation (disclose whether hourly, flat rate contingency or other):

“Contingency fee” means a fee, bonus, commission, or nonmonetary benefit as compensation, which is dependent, or in any way contingent on the enactment, defeat, modification, or other outcome of any specific action of the City Commission.

hourly standard compensation for legal services

VII. Signature Under Oath

I do solemnly swear that all of the foregoing facts are true and correct and that I have read or am familiar with the provisions contained in Sections 2-290 – 2-296 of the Code Ordinances of the City of Lighthouse Point and all reporting requirements.

[Handwritten Signature]

Signature of Lobbyist

[Handwritten Signature]

Signature of Principal/Client

VIII. Signature and Stamp of Notary

Notarization of LOBBYIST signature:

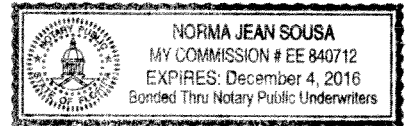
State of Florida
County of Broward

SWORN TO and subscribed before me this 8th day of October 2013.

[Handwritten Signature]

Signature of Notary

Personally known or
 Produced ID _____



Notarization of PRINCIPAL’S signature:

State of Florida
County of Broward

SWORN TO and subscribed before me this 4 day of October 2013

Personally known or
 Produced ID _____

Susan P. Motley
Signature of Notary



FOR CLERKS USE ONLY

Annual Registration fee: YES () NO Amount Paid ^{\$}100.00 Date Paid 10/10/13
Lobbyist Registration Form received and verified by: *gmda*