

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 (Last) Susan (First) P. (M.I.)
Name of Lobbyist
Greenspoon Marden P.A. 100 Cypress Creek Rd. #700, Ft. Lauderdale,
Business Name and Address (Number and Street) (City) (State) (Zip Code) FL 33309
23.60 N.E. 28 St. 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:

Beacon Light Partners, Ltd.
Name of Principal/Client:
1821 N.E. 24th Street Lighthouse Point, FL 33064
Business Name and Address (Number and Street) (City) (State) (Zip Code)
954-783-9100; 954-337-0562; mcolor@tritonpropertiescorp.com
Telephone Number: Fax Number: Email:
Shopping Center
Nature of Business

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

*Name of Chief Officer, Partner, or Beneficiary:

Michael Colon

*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).

*Any issues affecting
Beacon Light shopping center.*

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 Commission, Planning &
Zoning Board, members.*

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

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.

Susan P. Motley
Signature of Lobbyist

[Signature]
Signature of Principal/Client

VIII. Signature and Stamp of Notary

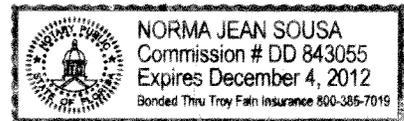
Notarization of LOBBYIST signature:

State of Florida
County of Broward

SWORN TO and subscribed before me this 21st day of May 2012.

Norma Jean Sousa
Signature of Notary

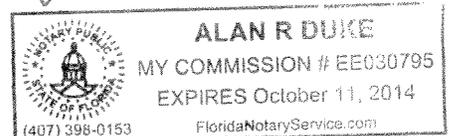
Personally known *or*
 Produced ID _____



Notarization of PRINCIPAL’S signature:

State of Florida
County of Broward

SWORN TO and subscribed before me this 30 day of May 2012.





Signature of Notary

Personally known or
Produced ID _____

FOR CLERKS USE ONLY

Annual Registration fee: () YES () NO Amount Paid \$100.00 Date Paid 6/20/12
Lobbyist Registration Form received and verified by: gmh