LOBBYIST REGISTRATION AFFIDAVIT

1. Lobbyist Name:  McDearmaid  Michael
   Last Name  First  Middle
   Lobbyist Phone:  (305) 439-5838
   Lobbyist Address:  840 N.E. 127th Street
                      North Miami  FL  33161
                      Street  City  State  Zip

2. Principal Represented:  Magellan Housing
   Principal Address:  2100 Coral Way Suite 405
                      Miami  FL  33145
                      Street  City  State  Zip

Other Principals or Interests and Address (Detail):

3. Specific Issue on which the Lobbyist has been retained (Describe in Detail):

   Lobbyist specifically includes principal as well as any agent, officer, or employee of a principal. Each person who withdraws as a lobbyist is required to file a Certificate of Withdrawal.

4. Registration Fee paid?  NO____  YES___  (Cash____ or Check____)

5. Please identify all Council People or Personnel to be lobbied:
   All City Council and Staff

6. The subject matter in number (3) above is to be considered at which meeting? (Check all applicable)
   City Council  X____
   Zoning Board of Adjustment  X____
   Planning Commission  X____
   City Board  X____
   RFP Review/Selection Committee  X____
   CRA Board  X____
   CRA  X____

776 NE 125 Street | North Miami | Florida | 33161  305.893.6511
7. Please state the extent of any business, financial, familial, and professional or other relationship which exists with any individual identified in number (5) above.

Friendly Association

OATH

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE  

I, the undersigned registrant, do hereby depose under oath and say that the information disclosed and any attachments are true and correct.

Signature

Sworn to and subscribed before me this 7th day of October, 2020.

Notary Public

My Commission Expires: 10/25/2020