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HAWAII STATE ETHICS COMMISSION
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or P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: (808) 587-0460 FAX: (808) 587-0470
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Web site: www.hawaii.gov/ethics

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STATE OF HAWAII
STATE ETHICS COMMISSION

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST
NAME (Last) (First) (Middle) TELEPHONE
EADS CHRYSSTN K.A. 808-524-1800
MAILING ADDRESS (Street) FAX 808-524-4591
1001 BISHOP STREET, SUITE 1800
EMAIL CEADS@AHFI.COM
(City) (State) (Zip Code)
HONOLULU HI 96813
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) TELEPHONE
ALSTON HUNT FLOYD ING 808-524-1800
MAILING ADDRESS (Street) FAX
1001 BISHOP STREET, SUITE 1800
EMAIL CEADS@AHFI.COM
(City) (State) (Zip Code)
HONOLULU HI 96813

PART II ORGANIZATION
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) TELEPHONE
BioTork LLC (352) 505-8611
MAILING ADDRESS (Street) FAX
2153 SE Hawthorne Road, Suite 130
EMAIL marc.penicaud@biotork.com
(City) (State) (Zip Code)
Gainesville Florida 32641
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT TELEPHONE
Marc Penicaud (352) 505-8611
MAILING ADDRESS (Street) FAX
2153 SE Hawthorne Road, Suite 130
EMAIL marc.penicaud@biotork.com
(City) (State) (Zip Code)
Gainesville Florida 32641

REC'D BY HAND DELIVERY

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operation & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	_____

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Chytr Abot Eak

(Signature of Lobbyist)

April 7, 2014

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Marc Penicaud	Executive Vice President

NAME OF ORGANIZATION (if applicable)	TELEPHONE
BioTork LLC	(352) 505-8611

MAILING ADDRESS (Street)	FAX
2153 SE Hawthorne Road, Suite 130	
	EMAIL
	marc.penicaud@biotork.com

(City)	(State)	(Zip Code)
Gainesville	Florida	32641

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

Stef

(Signature of Authorizing Officer or Person Represented)

4.8.14

(Date)