



**HAWAII STATE ETHICS COMMISSION**  
 1001 BISHOP STREET, HONOLULU, HAWAII 96813  
 or P.O. BOX 616, HONOLULU, HAWAII 96809  
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STATE OF HAWAII  
 STATE ETHICS COMMISSION

NOTE: This is a public document.

**LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME (Last)	(First)	(Middle)	TELEPHONE
KANEKO	WILLIAM	M.	(808) 524-1800
MAILING ADDRESS (Street)			FAX (808) 524-4591
1001 Bishop Street, Suite 1800			EMAIL WKANEKO@AHFI.COM
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	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 (808) 524-4591
1001 Bishop Street, Suite 1800			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

<b>PART II ORGANIZATION</b>			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
American Resort Development Association			(407) 245-7601
MAILING ADDRESS (Street)			FAX
225 E. Robinson Street, Suite 545			EMAIL
(City)	(State)	(Zip Code)	
Orlando	Florida	32801	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Justin Vermuth			(407) 245-7601
MAILING ADDRESS (Street)			FAX
225 E. Robinson Street, Suite 545			EMAIL JVERMUTH@ARDA.ORG
(City)	(State)	(Zip Code)	
Orlando	Florida	32801	

**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 checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities         | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation                       |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs               | <input checked="" 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 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.*

  
 \_\_\_\_\_  
 (Signature of Lobbyist)

3/21/16  
 \_\_\_\_\_  
 (Date)

**PART V AUTHORIZATION TO LOBBY**

NAME Justin Vermuth		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Dir. of State Gov. Affairs & Legislative Counsel	
NAME OF ORGANIZATION (if applicable) American Resort Development Association		TELEPHONE (407) 245-7601	
MAILING ADDRESS (Street) 225 E. Robinson Street, Suite 545		FAX	
		EMAIL JVERMUTH@ARDA.ORG	
(City) Orlando	(State) Florida	(Zip Code) 32801	

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

  
 \_\_\_\_\_  
 (Signature of Authorizing Officer or Person Represented)

3-21-16  
 \_\_\_\_\_  
 (Date)