



HAWAII STATE ETHICS COMMISSION
 1001 BISHOP STREET, HONOLULU, HAWAII 96813
 or P.O. BOX 616, HONOLULU, HAWAII 96809
 TEL: (808) 587-0460 FAX: (808) 587-0470
 email: ethics@hawaiiethics.org
 Web site: www.hawaii.gov/ethics

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STATE OF HAWAII
 STATE ETHICS COMMISSION

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LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

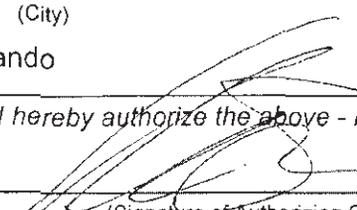
PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Pear, Jr.	Charles	E.	(808) 223-1212
MAILING ADDRESS (Street)			FAX (808) 535-8029
Five Waterfront Plaza, 500 Ala Moana Boulevard, 4th Floor			EMAIL pear@m4law.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
McCorriston Miller Mukai MacKinnon LLP			(808) 529-7300
MAILING ADDRESS (Street)			FAX (808) 524-8293
Five Waterfront Plaza, 500 Ala Moana Boulevard, 4th Floor			EMAIL info@m4law.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
American Resort Development Association			(407) 245-7601
MAILING ADDRESS (Street)			FAX
4901 Vineland Road, Suite 635			EMAIL
(City)	(State)	(Zip Code)	
Orlando	Florida	32811	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Keith Stephenson			(407) 245-7601
MAILING ADDRESS (Street)			FAX
4901 Vineland Road, Suite 635			EMAIL KStephenson@arda.org
(City)	(State)	(Zip Code)	
Orlando	Florida	32811	

REC'D BY email

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 checked="" type="checkbox"/> Tourism & Recreation
<input checked="" 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 type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	_____

PART IV CERTIFICATION OF LOBBYIST	
<i>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
 (Signature of Lobbyist)	<u>2/3/2015</u> (Date)

PART V AUTHORIZATION TO LOBBY		
NAME Keith Stephenson		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Vice President, State Government Affairs
NAME OF ORGANIZATION (if applicable) American Resort Development Association		TELEPHONE (407) 245-7601
MAILING ADDRESS (Street) 4901 Vineland Road, Suite 635		FAX
(City) Orlando	(State) Florida	(Zip Code) 32811
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>		
 (Signature of Authorizing Officer or Person Represented)		<u>2/3/2015</u> (Date)