LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

1041

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 7/11/02

F09
1110 #100
1110 #10

1021017

Instructions

- Print in ink or type.
- Complete form and return with $10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (225) 922-1400 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME Callahan, Michael D.
   Last First MI

2. BUSINESSPHONE (318) 297-1826
   Area Code and Phone Number

3. BUSINESS ADDRESS 3100 Deborah Dr., Monroe, LA 71201
   Street and No. City State Zip

   MAILING ADDRESS 3100 Deborah Dr., #86, Monroe, LA 71201
   Street and No. City State Zip

4. EMPLOYER The Janssen Group

5. EMPLOYER'S ADDRESS 3100 Deborah Dr., #86, Monroe, LA 71201
   Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

   1. Name Supreme Home Health

      Address 1110 Jackson St., Monroe, LA 71201

      Business or purpose Home Health Agency

      Does this person pay you? Yes

      If No, who pays you?

Form 500, Rev. 8/99

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2. Name DeHA STATE Holding Company, Inc.

   Address 141 Desiard Street, Suite 314, Monroe, LA 71201

   Business or purpose BANKING Institution

   Does this person pay you? yes

   If No, who pays you?

3. Name MONROE SURGICAL HOSPITAL

   Address P.O. Box 9161, MONROE, LA 71201

   Business or purpose HOSPITAL

   Does this person pay you? yes

   If No, who pays you?

4. Name

   Address

   Business or purpose

   Does this person pay you?

   If No, who pays you?

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Michael D Callahan

Signature of Lobbyist

Form 400 Rev 8/99