LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

1230

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 04/20/06
Reg. 2006
J#592
$110.00 WR

1060389

Instructions

- Print in ink or type.
- Complete form and return with $110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 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 TORRENCE (Last) PRESTON (First) J (MI)

2. BUSINESS PHONE (225) 214-4354 (Area Code and Phone Number)

3. BUSINESS ADDRESS 11931 Justice Ave Suite B (Street and No.) Baton Rouge (City) LA (State) 70816 (Zip)

*MAILING ADDRESS P.O. Box 41174 (Street and No.) BR (City) LA (State) 70835-1174 (Zip)

4. EMPLOYER K.B. TORRENCE & Associates, LLC

5. EMPLOYER'S ADDRESS 11931 Justice Ave Suite B (Street and No.) BR (City) LA (State) 70816 (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 Wellport, Inc.

Address 7169 Florida Blvd. Baton Rouge, LA 70805

Business or purpose Wellness monitoring & management provider.

Does this person pay you? NO*

If No, who pays you? *part owner of Wellport. Unpaid at this time

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Form 600, Rev. 10/2002

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2. Name K.B. Torrence & Associates, LLC (KBTA)

Address 11931 Justice Ave Suite B Baton Rouge LA 70816

Business or purpose Medical Billing Services.

Does this person pay you? NO*

If No, who pays you? * part owner of KBTA

3. Name

Address

Business or purpose

Does this person pay you?

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.

#1230

Signature of Lobbyist

Form 500, Rev. 10/2002