LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

1381

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 5-11-0
Reg 2007
V#831
$110
WM:

1070279

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 LEBLANC, MICHÈLE M.
   Last / First / MI

2. BUSINESS PHONE 1-846.529.3529
   Area Code and Phone Number

3. BUSINESS ADDRESS 634 ST. JOSEPH ST., BATON ROUGE, LA 70802
   Street and No. / City / State / Zip

   MAILING ADDRESS P.O. BOX 3153, BATON ROUGE, LA 70821
   Street and No. / City / State / Zip

4. EMPLOYER AELGLA (LAW FIRM)

5. EMPLOYER'S ADDRESS P.O. BOX 3153, BATON ROUGE, LA 70821
   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 STUDIO CITY LOUISIANA, LLC

      Address P.O. BOX 3929, BATON ROUGE, LA 70821

      Business or purpose FILM STUDIO AND PRODUCTION BUSINESS
      TELEVISION STUDIO AND RECORDING BUSINESS

      Does this person pay you? NO

      If No, who pays you? SELF-EMPLOYED

Form 500, Rev. 10/2002

AUDITED
SEP 14 2007
By: MD

HAND DELIVERED

2007 MAY 11 PM 4:39
RECEIVED

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2. Name AES SECTION OF THE LSBA

Address PO-Box 3153, BATON ROUGE, LA 70821-3153

Business or purpose NON-PROFIT SECTION

Does this person pay you? NO

If No, who pays you? SELF-EMPLOYED

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.

Signature of Lobbyist

Form 600, Rev. 10/2002