LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

7915
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 6/25/07
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SCANNED
JUL 12 2007
By 1070

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 Massie (Last) James (First) _____ (MI)

2. BUSINESS PHONE 850-222-7710 (Area Code and Phone Number)

3. BUSINESS ADDRESS 1660 East Jefferson Street (Street and No.) Tallahassee (City) FL (State) 32301 (Zip)

MAILING ADDRESS Same as above (Street and No.) _____ (City) _____ (State) _____ (Zip)

4. EMPLOYER Reinsurance Association of America

5. EMPLOYER'S ADDRESS 1301 Pennsylvania NW, Suite 900 (Street and No.) Washington (City) DC (State) 20004 (Zip)

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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 Reinsurance Association of America

Address 1301 Pennsylvania Avenue NW, Suite 900 Washington, DC 20004

Business or purpose Insurance

Does this person pay you? yes

If No, who pays you? _____

Form 300, Rev. 10/2003

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2. Name JAMES C. MASSIE

Address 660 EAST JEFFERSON STREET
TALLAHASSEE, FLORIDA 32301

Business or purpose REINSURANCE ASSOCIATION OF AMERICA

Does this person pay you? YES

If No, who pays you?

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 800, Rev. 10/2000