EXECUTIVE LOBBYING REGISTRATION/ RENEWAL FOR THE YEAR OF 2007

(Fill in year.)

Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 12-8-06
Ren 2007
#371170
$110.00
WMI

3361487

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 McKearn (Last) Kristy (First) G. (MI)

2. BUSINESS PHONE 225-381-7028 (Area Code and Phone Number)

3. FAX NUMBER 225-343-3612

4. BUSINESS ADDRESS 301 N. Main St. Suite 830 (Street and No.) B.R. (City) LA (State) 70825 (Zip)

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

5. EMPLOYER Baker, Donelson, Bearman, Caldwell & Berkowitz.

6. EMPLOYER'S ADDRESS Same (Street and No.) (City) (State) (Zip)

7. 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 APS HealthCare, Inc.

Address 8403 Colesville Rd. Silver Spring, MD 20910

Business or purpose HealthCare

Does this person pay you? yes

If No, who pays you?

2006 DEC 11 PM 1:23
ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED

EXECUTIVE LOBBYING REGISTRATION FORM

95
Executive Lobbyist Registration No.

2. Name Baker, Donelson, Bearman, Caldwell & Berkowitz

Address 301 N. Main St, Suite 830 Baton Rouge, LA 70825

Business or purpose Law firm

Does this person pay you? Yes

If No, who pays you?

3. Name Big Play Entertainment

Address #2 Canal St. World Trade Center, Suite 2925 New Orleans, LA 70130

Business or purpose Business development

Does this person pay you? Yes

If No, who pays you?

4. Name First American Title Insurance Company

Address 2075 Centre Pointe Blvd. Tallahassee, FL 32308

Business or purpose Insurance

Does this person pay you? Yes

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 LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Lobbyist

ATTACH 2" x 2" PHOTOGRAPH HERE

EXECUTIVE LOBBYING REGISTRATION/RENEWAL ATTACHMENT FORM

Executive Lobbyist Registration No.

Instructions:

- Please make as many copies of this form as necessary in order to complete Question 7 of the Executive Lobbying Registration/Renewal Form.
- Fill in your Executive Lobbyist Registration No. in the space provided in the upper right hand corner of the page.
- Please identify each page with a page number and indicate the total number of pages being submitted.

1. Name Fresenius Medical Care
   Address 95 Hayden Drive Lexington, MA 02420
   Business or purpose Healthcare
   Does this person pay you? yes
   If No, who pays you?
2. Name Medtronic, Inc.
   Address 1800 Pyramid Place Memphis, TN 38132
   Business or purpose Medical devices
   Does this person pay you? yes
   If No, who pays you?
3. Name National Association of Public Insurance Adjusters
   Address 21165 Whitfield Place, 105 Potomac Falls, VA 20165
   Business or purpose insurance adjusting
   Does this person pay you? yes
   If No, who pays you?
4. Name Touro Infirmary
   Address 1401 Foucher St. New Orleans, LA 70115
   Business or purpose HealthCare Service
   Does this person pay you? yes
   If No, who pays you?

EXECUTIVE LOBBYING REGISTRATION/RENEWAL ATTACHMENT FORM

Instructions:

- Please make as many copies of this form as necessary in order to complete Question 7 of the Executive Lobbying Registration/Renewal Form.
- Fill in your Executive Lobbyist Registration No. in the space provided in the upper right hand corner of the page.
- Please identify each page with a page number and indicate the total number of pages being submitted.

1. Name River Road Films L.L.C.
   Address 424 LSU Ave. Baton Rouge, LA 70825
   Business or purpose Film Industry
   Does this person pay you? yes
   If No, who pays you? 2
2. Name USA Funds
   Address 2000 L St. NW Suite 402 Washington DC 20036
   Business or purpose student finance
   Does this person pay you? yes
   If No, who pays you?
3. Name Gilsbar Inc.
   Address 2100 Covington Centre, Covington, LA 70433
   Business or purpose Third Party Administrator
   Does this person pay you? yes
   If No, who pays you?
4. Name Louisiana Alliance of YMCAs
   Address 1215 Prytania St, Suite 163 New Orleans, LA 70130
   Business or purpose YMCA
   Does this person pay you? yes
   If No, who pays you?