EXECUTIVE LOBBYING REGISTRATION/ RENEWAL FOR THE YEAR OF 2007

(Fill in year.)

FOR OFFICE USE ONLY
Postmark Date: 8-14-07
2007 Reg
$110
91399
SCANNED
AUG 21 2007
By:
3070516

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 Ballard (Last) Jason (First) ___ (MI)

2. BUSINESS PHONE 870-219-6702 (Area Code and Phone Number)

3. FAX NUMBER 501-726-0034

4. BUSINESS ADDRESS 4136 Hillside Dr. (Street and No.) N. Little Rock (City), AR (State) 72118 (Zip)

MAILING ADDRESS 4136 Hillside Dr. (Street and No.) N. Little Rock (City), AR (State) 72118 (Zip)

5. EMPLOYER Enzon Pharmaceuticals, Inc.

6. EMPLOYER'S ADDRESS 685 Route 202/206 (Street and No.) Bridgewater (City), NJ (State) 08807 (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 Enzon Pharmaceuticals, Inc.

Address 685 Route 202/206 Bridgewater, NJ 08807

Business or purpose Pharmaceutical Sales/Promotion

Does this person pay you? Yes

If No, who pays you? ___

EXECUTIVE LOBBYING REGISTRATION FORM

2. Name_____

   Address_____

   Business or purpose_____

   Does this person pay you?_____

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

_____
Signature of Lobbyist