HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST

NAME (Last)	(First)	(Middle)	TELEPHONE
Kamali'i	Adrian	K.	8085998705
MAILING ADDRESS (Street)			FAX
1050 Kina'u Street, STE 706			8083560868
(City)	(State)	(Zip Code)	
Honolulu	Hi	96814	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Pae 'Aina Communications, LLC			8085998705
MAILING ADDRESS (Street)			FAX
SAME AS ABOVE			8083560868
(City)	(State)	(Zip Code)	

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Springer Development, Inc.			310.488.0999
MAILING ADDRESS (Street)			FAX
10000 Wilshire Blvd. 20th Floor			
(City)	(State)	(Zip Code)	
Los Angeles	CA	90024	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Adrian Kamali'i			8085998705
MAILING ADDRESS (Street)			FAX
SAME AS ABOVE			8083560868
(City)	(State)	(Zip Code)	

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PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

☐ Agriculture	☑ Education	☑ Human Services	☐ Science, Technology & Economic Development
☐ Communications & Public Utilities	☐ Government Operation & Finance	☐ Intergovernmental Relations, International Affairs	☐ Tourism & Recreation
☐ Consumer Protection & Commerce	☑ Hawaiian Affairs	☑ Labor & Employment	☐ Transportation
☑ Culture, Arts, Historic Preservation	☐ Health	☐ Planning, Land & Water Use Management	☐ Other: (indicate below)
☑ Ecology, Energy Environmental Protection	☑ Housing	☐ Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

X Signature Block X 1/28/07

(Signature of Lobbyist) (Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
John Stippen, Esq	VP, Government Affairs

NAME OF ORGANIZATION (if applicable)	TELEPHONE
Springer Development, Inc.	
MAILING ADDRESS (Street)	**FAX**
10000 Wilshire Blvd., 20th Floor	

(City)	(State)	(Zip Code)
Los Angeles	CA	90024

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

Signature Block Dec 26, 2006

(Signature of Authorizing Officer or Person Represented) (Date)