Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

LOBBYING REPORT

I. Registrant Name	_		
LAWRENCE J.	SMITH, P.A. CER	merry Lawrence	J. SMITHS
2. Address Check if different than previously rep		7	
3111 STIRLING 6	D C-308 FORT	-LAUDERDALR, F	1 33312
3. Principal Place of Business (if different from line 2)			, , , , , , , , , , , , , , , , , , ,
City: SAME	State/Zip (or Country)		
4. Contact Name Tel	phone	E-mail (optional)	5. Senate ID#
LAWRONCE J	Sm17H 954 985417	11 CONGISCHOTM	464 3577
7. Client Name		1	6. House ID#
MICCOSUKEE TRIBEOF I	NDIANS OF FLORIDA		3394500
INCOME OR EXPENSES - Co	mplete Either Line 12 O	OR Line 13	
12. Lobbying Firms		13. Organ	izations
INCOME relating to lobbying activities for the period was:	is reporting EXPENSE period were	ES relating to lobbying a	-
Less than \$10,000 🔲	Less than \$	10,000 🗖	·
\$10,000 or more	\$10,000 or	more □ 🖘 \$.'
Income (near	et: 520 000)	ORTING METHOD. C	Expenses (nearest \$ heck how to indicate
Provide a good faith estimate, rounded to the ne	earest \$20,000, accounting	accounting method. See instructions for description of	
of all lobbying related income from the clien payments to the registrant by any other entit	(including all	od A. Reporting amounts	s using LDA definit
activities on behalf of the client)	٠	d B. Reporting amount	- wale of con-
	- Metho	Internal Revenue (

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Signature		/ / N	///#A	/		
Printed Name and 1	Title	LAWRE	NCe .	I. Smrth, Pres.	:	
TIND OF THE COMMEN						

Registrant Name Lawkewce J. Smrt P.A Client Na	
LOBBYING ACTIVITY. Select as many codes as necessal engaged in lobbying on behalf of the client during the report information as requested. Attach additional page(s) as needed.	ind period Ilring a sense
15. General issue area code TND (one per page)	
16. Specific lobbying issues	
NONE	
17. House(s) of Congress and Federal agencies contacted	Check if None
a and a second and a second acted	Check If None
18. Name of each individual who acted as a lobbyist in this i	ssue area
Name	Covered Official Position (if applicable)
LAWRENCE I-SMITH	
	······································
19. Interest of each foreign entity in the specific issues listed on lin	te 16 above Check if None
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Signature	1 10 ///04	Date 2/5/04
Printed Name and Title_	LAWRENCE J. SMITH, PRES	
Form I D D (B)	•	Por