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08 APR -5

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

# LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

|                                                                                            |                |                          |                                  |
|--------------------------------------------------------------------------------------------|----------------|--------------------------|----------------------------------|
| 1. Registrant name                                                                         |                |                          |                                  |
| Organization                                                                               |                | The America Channel, LLC |                                  |
| 2. Address <input checked="" type="checkbox"/> Check if different than previously reported |                |                          |                                  |
| Address 1                                                                                  |                | 5th Floor                |                                  |
| 801 International Parkway                                                                  |                |                          |                                  |
| City                                                                                       | Heathrow       | State                    | FL                               |
|                                                                                            |                | Zip Code                 | 32746                            |
|                                                                                            |                | Country                  | US                               |
| 3. Principal place of business (if different than line 2)                                  |                |                          |                                  |
| City                                                                                       | same           | State                    |                                  |
|                                                                                            |                | Zip Code                 |                                  |
|                                                                                            |                | State/Zip or Country     |                                  |
| 4a. Contact Name                                                                           |                | b. Telephone number      | c. E-mail                        |
| Prefix                                                                                     | Full Name      |                          |                                  |
| Mr.                                                                                        | Doron Gorshein | 407-333-3031             | doron.gorshein@americachannel.us |
| 7. Client Name <input checked="" type="checkbox"/> Self                                    |                |                          | 5. Senate ID #                   |
|                                                                                            |                |                          | 286553-                          |
|                                                                                            |                |                          | 6. House ID #                    |
|                                                                                            |                |                          | 3699901                          |

**TYPE OF REPORT** 8. Year 2007 Midyear (January 1-June 30) ☐ OR Year End (July 1-December 31) ☐

9. Check if this filing amends a previously filed version of this report ☐

10. Check if this is a Termination Report ☐ ⇨ Termination Date \_\_\_\_\_ 11. No Lobbying Act ☐

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

| 12. Lobbying Firms                                                                                                                                                                                                             | 13. Organizations                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|
| INCOME relating to lobbying activities for this reporting period was:                                                                                                                                                          | EXPENSES relating to lobbying activities for this reporting period were:                                   |
| Less than \$10,000 <input type="checkbox"/>                                                                                                                                                                                    | Less than \$10,000 <input checked="" type="checkbox"/>                                                     |
| \$10,000 or more <input type="checkbox"/> ⇨ \$ _____                                                                                                                                                                           | \$10,000 or more <input type="checkbox"/> ⇨ \$ _____                                                       |
| Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client). | 14. REPORTING METHOD. Check box to indicate exp accounting method. See instructions for description of opt |
|                                                                                                                                                                                                                                | <input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions                          |
|                                                                                                                                                                                                                                | <input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(1) Internal Revenue Code |
|                                                                                                                                                                                                                                | <input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of Internal Revenue Code  |

Form

1000012867

Printed Name and Title Doron Gorshein, CEO & President

LD-2DS (Rev. 4.07)

Page 1

15. General issue area code COM - Communications/Broadcasting/Radio/TV (one per page)

Add page to continue specific issues description for this issue >

17. House(s) of Congress and Federal agencies contacted ☐ None ☒ House ☒ Senate ☒ Other

18. Name of each individual who acted as a lobbyist in this issue area *Add a page to continue adding lobbyists for*

19. Interest of each foreign entity in the specific issues listed on line 16 above ☒ Check if None

Filing #3d0cf924-07ff-4787-a6f0-0cecc2f50c12 - Page 3 of 6

40  
10  
40  
2  
44  
40  
40  
40  
40



Printed Name and Title Doron Gorshein, CEO & President

LD-2DS (Rev. 4.07)

Page 2

Registrant Name The America Channel, LLCClient Name The America Channel, LLC**Information Update Page - Complete ONLY where registration information has changed.****20. Client new address**

Address

City

State

Zip Code

Country

**21. Client new principal place of business (if different than line 20)**

City

State

Zip Code

Country

**22. New general description of client's business or activities****LOBBYIST UPDATE****23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client**

First Name

Last Name

Suffix

First Name

Last Name

1

3

2

4

**ISSUE UPDATE**

Find the code to select below.

**24. General lobbying issues that no longer pertain****AFFILIATED ORGANIZATIONS****25. Add the following affiliated organization(s)**

| Name | Address | Principal place of Business<br>(city and state or country) |
|------|---------|------------------------------------------------------------|
|      | Address | City                                                       |
|      | C/S/Z   | State Country                                              |
|      | Address | City                                                       |
|      | C/S/Z   | State                                                      |

**26. Name of each previously reported organization that is no longer affiliated with the registrant or client**

1

2

3

**FOREIGN ENTITIES****27. Add the following foreign entities**

| Name | Street Address<br>City | Address<br>State/Province Country | Principal place of business<br>(city and state or country) | Amount of contribution<br>for lobbying activities | Overseas |
|------|------------------------|-----------------------------------|------------------------------------------------------------|---------------------------------------------------|----------|
|      |                        |                                   | City                                                       |                                                   |          |
|      |                        |                                   | State Country                                              |                                                   |          |

**28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant affiliated organization**

1

3

5

2

4

6

Add a page for more

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