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LOBBYING REPORT

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

1. Registrant Name Hobbs, Straus, Dean & Walker, LLP			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 2120 L Street, NW Suite 700 City Washington State/Zip (or Country) DC 20037			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name S. Bobo Dean	Telephone 202-822-8282	E-mail (optional) sdean@hswdwc.com	5. Senate ID # 18364-113
7. Client Name <input type="checkbox"/> Self Miccosukee Tribe of Indians			6. House ID # 31356026

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) OR Year End (July 1-De

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 Lobby

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 checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> >> \$ _____ Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> >> \$ _____ Expenses (nearest \$20,000)
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 accounting method. See instructions for description of
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input type="checkbox"/> Method B. Reporting amounts under section 603 of the Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162 of the Internal Revenue Code

Signature _____ Date _____

Printed Name and Title **S. Bobo Dean - Partner** _____ Pa

Registrant Name: **Hobbs, Straus, Dean & Walker, LLP**

Client Name: **Miccosukee Tribe of Indians**

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.**

15. General issue area code **IND** (one per page)

16. Specific Lobbying issues

HR 2440, Indian Health Care Improvement Act Amendments, all provisions

HR 3550, Safe, Accountable, Flexible, and Efficient Transportation Equity Act, Indian related provisions

S 1715, Department of the Interior Tribal Self-Governance Act, all provisions

S 556, Indian Health Care Improvement Act Reauthorization, all provisions

Proposed Sovereignty Protection Initiative bill

17. House(s) of Congress and Federal agencies contacted

Check if None

Department of the Interior

House of Representatives

Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Bailey, Adam	
Barbero, Carol L.	
Dean, S. Bobo	
Funk, Karen J.	
Hughes, Jennifer	
Stearns, Chris	
Strommer, Geoffrey D.	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature _____ Date _____

Printed Name and Title **S. Bobo Dean - Partner** _____ Pa

Registrant Name: Hobbs, Straus, Dean & Walker, LLP

Client Name: Miccosukee Tribe of Indians

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

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

City _____ State/Zip (or 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
Binney, Allison

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)

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

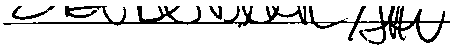
FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal Place of Business (city and state or country)	Amount of contribution for lobbying activities

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

Shahman

Signature  Date 2/17/2008

Printed Name and Title S. Bobo Dean - Partner Pa