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Washington, DC 20510

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LOBBYING REPORT

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

1. Registrant Name Mark Schwartz			
2. Address <input type="checkbox"/> Check if different than previously reported 1225 Eye Street, N.W. Suite 350			
3. Principal Place of Business (if different from line 2) City: Washington, D.C. 20005 State/Zip (or Country)			
4. Contact Name Mark Schwartz	Telephone (202) 824-6675	E-mail (optional) mschwartz@markschwartzlaw.com	5. Senate ID 288395-3
7. Client Name <input type="checkbox"/> Self City of Greenacres, FL			6. House ID # 3709100

TYPE OF REPORT 8. Year 2005 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

<p style="text-align: center;">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$ 10,000 <input checked="" type="checkbox"/></p> <p>\$ 10,000 or more <input type="checkbox"/> * \$ _____ Income (nearest \$20,000)</p> <p>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).</p>	<p style="text-align: center;">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this period were:</p> <p>Less than \$ 10,000 <input type="checkbox"/></p> <p>\$ 10,000 or more <input type="checkbox"/> * \$ _____ Expenses (nearest \$</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 1 Internal Revenue Code</p>
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Signature Mark Schwartz

Date: August 4,

Printed Name and Title Mark Schwartz

LD-2 (REV. 6/99)

Registrant Name Mark Schwartz

Client Name City of Greenacres, FL

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

15. General issue area code POS (one per page)

16. Specific lobbying issues

Zip Code issues relating to the client's municipal boundaries.

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

Check if None

U.S. Postal Service
House of Representatives

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

Name	Covered Official Position (if applicable)
Mark Schwartz	

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

Check if None

Signature



Date August 4, 2005

Printed Name and Title: Mark Schwartz, Attorney at Law

Form LD-2 (Rev.6/98)

P: