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LOBBYING REPORT

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

1. Registrant Name <u>LAWRENCE J. SMITH, P.A. (FORMERLY LAWRENCE J. SMITH)</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>3111 STIRLING RD G-308 FORT LAUDERDALE, FL. 33312</u>			
3. Principal Place of Business (if different from line 2) City: <u>Same</u> State/Zip (or Country): _____			
4. Contact Name <u>LAWRENCE J. SMITH</u>	Telephone <u>954 985-4171</u>	E-mail (optional) <u>CONQ12@HOTMAIL.COM</u>	5. Senate ID # <u>35715-</u>
7. Client Name <input type="checkbox"/> Self <u>ATLANTIC STORES HEALTH CARE, INC.</u>			6. House ID # <u>3394501</u>

TYPE OF REPORT 8. Year 2003 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

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>20,000⁰⁰</u> 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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting 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 of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6031 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature

JYW/A

Printed Name and Title

LAURENCE J. SMITH, PRES

Pres

Registrant Name LAWRENCE I. SMITH, P.A. Client Name ATLANTIC SHORES HEALTH CARE, INC

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

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

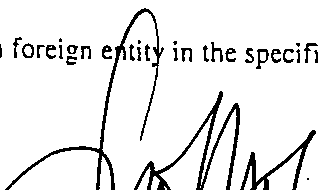
16. Specific lobbying issues
NONE

17. House(s) of Congress and Federal agencies contacted Check if None
NONE

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

Name	Covered Official Position (if applicable)
LAWRENCE I. SMITH	

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



Signature

[Handwritten Signature]

Date

2/5/04

Printed Name and Title

Lawrence S. Smith, Pres

Form 1099-B (01-01-04)

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