

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
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SECRETARY OF
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LOBBYING REPORT

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

1. Registrant Name SUNTREE CONSULTANTS			
2. Address <input type="checkbox"/> Check if different than previously reported 1515 FIGUS POINT DRIVE			
3. Principal Place of Business (if different from line 2) City: MELBOURNE State/Zip (or Country) FLORIDA 32940			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID
ROBERT J. LUDWICZAK	321/255-2052	LudwiczakR@aol.com	29
7. Client Name <input type="checkbox"/> Self 2020 ADVISORS, LLC			6. House ID # 37549

TYPE OF REPORT 8. Year 2005 Midyear (January 1-June 30) OR Year End (July 1-D

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 Lobbyi

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 checked="" type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>24,400</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 r period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20</p> <p>14. REPORTING METHOD. Check box to indic accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA defir</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

Robert J. Ludwiczak

Printed Name and Title ROBERT J. LUDWICZAK

LD-2 (REV. 6/98)

Registrant Name SUNTREE CONSULTANTS Client Name 2020 ADVISORS

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 DEF (one per page)

16. Specific lobbying issues

FINANCIAL LITERACY, EDUCATION AND MANAGEMENT FOR MILITARY

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

HOUSE OF REPRESENTATIVES
U.S. SENATE
DEPARTMENT OF DEFENSE
EXECUTIVE OFFICE OF PRESIDENT
DEPARTMENT OF TREASURY

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

Name	Covered Official Position (if applicable)
<u>ROBERT J. LUOWICZAK</u>	

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

Signature Robert J. Luowiczak Date 7/13/05

Printed Name and Title ROBERT J. LUDWICZAK, PRESIDENT

Form LD-2 (Rev.6/98)

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Registrant Name SUSTREE CONSULTANTS 00000251790 Client Name DOJO ADVISORS, LLC

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

20. Client new address
1200 HARGER ROAD, SUITE 410 OAKBROOK, ILL 60523

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
FINANCIAL EDUCATION & CONSULTING

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain
BANK CSP EDU GOV RET TAX

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s) N/A

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 affiliated organization

Signature Robert J. Duchynski Date 7/13/05

Printed Name and Title ROBERT J. LUDWICZAK

Form LD-2 (Rev. 6/98)

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