Filing Status: Submitted

This message only acknowledges the receipt of your document. In no way is it intended to serve as an ev filing or as a guarantee that you are compliant with your filing requirements.

Your lobbying disclosure has been received and the confirmation number is listed below:

Receipt confirmation number: 200013845
Received: Tuesday, January 16, 2007 3:26:47 PM
Registrant Name: Sonny Callahan and Associates, LLC
Client Name: Medical Diagnostic Technologies, Inc.

When your form has been processed, you will be notified of the status of your filing via the email address one (1) of your form.

Click here to print this receipt for your records.

http://lobbyingdisclosure.house.gov

Representatives
[redacted]urce Center
[redacted]on Building
[redacted]gton, DC 20515

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510

SECRETARY
07 FEB 1[redacted]

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check One: ☐ New Registrant ☑ New Client for Existing Registrant ☐ Amendment

1. Effective Date of Registration 07/[redacted]

2. House Identification 36312 **Senate Identification** 81338

REGISTRANT ☑ Organization ☐ Individual

3. Registrant Organization Sonny Callahan and Associates

Address P.O. Box 9699 Address2

City Mobile State AL Zip 36691 - Cour

4. Principal place of business (if different than line 3)

City State Zip - Coun

5. Contact name and telephone number ☐ International Number

Contact Mr. Clay Swanzy Telephone (251) 602-4950 E-mail clayswanzy@sonnycallahan.com

6. General description of registrant's business or activities

Government Consulting

CLIENT

A Lobbying Firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should [redacted] labeled "Self" and proceed to line 10. ☐ *Self*

7. Client name TORP Terminal LP.

Address 15995 North Barkers Landing, Suite 310

City Houston State TX Zip 77079 - Count

8. Principal place of business (if different than line 7)

City State Zip - Count

9. General description of client's busines or activities

offshore energy

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of fi[redacted] a lobbyist for the client, *state the executive and/or legislative position(s) in which the person served.*

	Name			Covered Official Position (if applicable)
	First	Last	Suffix	
1	Sonny	Callahan	Mr.	
2	Braxton	Counts III	Mr.	
3	Dan	Cushing	Mr.	
4				
5				
6				

[redacted]ING ISSUES

[redacted]General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, p

ENG

12. Specific lobbying issues (current and anticipated)

seeking a license for an offshore energy terminal and related problems

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than $10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans supervises or controls the registrant's lobbying activities?

☑ No --> Go to line 14. ☐ Yes --> Complete the rest of this section for each entity matchi criteria above, then proceed to line 14.

Name	Address					Principal Place of Busin
	Street					
	City		State/Province	Zip Code	Country	
					City	
					State	Country
					City	
					State	Country
					City	
					State	Country

FOREIGN ENTITIES

14. Is there any foreign entity

a) holds at least 20% equitable ownership in the client or any organization identified on line 13: or
b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes activ the client or any organization identified on line 13; or
c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of th lobbying activity?

☑ No --> Sign and date the registration. ☐ Yes --> Complete the rest of this section for each entity matching the criteria above, then sign the registration.

Name	Address				Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ow
	Street						
	City	State/Province	Country				
				City			
				State	Country		
				City			
				State	Country		

Signature ✓ Digitally Signed By: Henry C Swanzy
US, DST ACES Business Representative, ACES TrustID Business Certificate, Henry C Swanzy

Date 01/16/20

Printed Name and Title Henry C Swanzy, Senior Associate