

TERMINATE

GOVERNMENT OF THE DISTRICT OF COLUMBIA
BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY
WASHINGTON, D.C. 20001

Year 2013

Original
 Amendment

LOBBYIST ACTIVITY REPORT *

(See next page for instructions) ID# _____

Type of Report: January 2013 If you are filing a January Report please indicate whether you intend to lobby in the upcoming calendar year. Yes No
 July _____

1. (a) Registrant's Name Florida Avenue Residential, LLC (b) Daytime Phone Number _____
(c) Permanent Address c/o The JBG Companies 240-333-3730
(Street Address) (City, State, Zip Code)
(d) Temporary Address (while lobbying)
4445 Willard Avenue, Suite 400, Chevy Chase, MD 20815
(Street Address) (City, State, Zip Code)

2. Lobbyist (s) Working for Registrant: Attach a Supplemental Sheet if additional space is needed.

(a) Name Holland & Knight LLP/Chrisy M. Shiker (b) Name _____
Address 800 17th Street, NW, #1100 Address _____
(Street Address) (Street Address)
Washington, DC 20006 _____
(City, State, Zip Code) (City, State, Zip Code)
Daytime Phone Number 202-955-3000 Daytime Phone Number _____

3. Person Compensating Registrant

(a) Name _____ (b) Daytime Phone Number _____
(c) Address _____
(Street Address) (City, State, Zip Code)
(d) Nature of Business _____

4. Terms of Compensation: (a) hourly (b) on-going
Salary Duration of Employment

5. Identify matter(s) by subject and formal designation on which the lobbyist/registrant expects to lobby. Attach a Supplemental Sheet if additional space is needed.

Alley Closing Legislation

* REMINDER - Each new or previously registered Lobbyist must file a Lobbyist Registration Form by January 15th of each year.

'13 JAN 25

Rev. 12/2012

6. Identify the official and title, if known, in the Executive or Legislative Branch with whom the registrant has had oral or written communication during the reporting period relating to lobbying activities, and the date that communication was made. Attach a Supplemental Sheet if additional space is needed.

Name	C. Gordon, Committee of the Whole	Date	9/28, 10/1, 10/3, 10/5, 10/10
Name	C. Gordon, Committee of the Whole	Date	10/15, 10/23, 10/24, 10/25, 11/3
Name	C. Gordon, Committee of the Whole	Date	11/13, 11/26
Name	M. Moss, Councilmember Graham's office	Date	9/28, 12/13
Name	_____	Date	_____
Name	_____	Date	_____

7. Total compensation/receipts paid to the Lobbyist for lobbying during the reporting period: \$ _____
(Schedule A)
8. Total of other compensation/receipts received for lobbying services and compensation paid to others: \$ _____
(Schedule A-1)
9. Total amount of Loans received by the Lobbyist in connection with lobbying during the reporting period: \$ _____
(Schedule A-2)
10. Total receipts (Add Lines 7, 8, and 9) \$ _____
11. Total of expenditures made for purposes of lobbying during the reporting period: \$ 1,617.00
(Schedule B)
12. Total of other expenditures related to lobbying activities: \$ _____
(Schedule B-1)
13. Total expenditures (Add Lines 11 and 12) \$ 1,617.00

BOARD OF ELECTIONS AND GOVERNMENT ACCOUNTABILITY
LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE ___ OF ___
SCHEDULE A – COMPENSATION/RECEIPTS PAID TO THE LOBBYIST FOR LOBBYING:

YEAR: _____

Type of Report: January _____ July _____

Period Covering: _____ through _____

LOBBYIST/EMPLOYEE LOBBYIST'S NAME: _____

COMPENSATION/RECEIPTS PAID FOR LOBBYING (AMOUNTS MAY BE ROUNDED OFF TO WHOLE DOLLARS)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)						
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)						
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)						
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)						
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
TOTAL RECEIPTS RECEIVED FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 7)					\$	\$

IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET (SEE NEXT PAGE FOR INSTRUCTIONS)

**BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY
 LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE ___ OF ___
 SCHEDULE A-1 -- LOBBYIST COMPENSATION/RECEIPTS RECEIVED FOR
 LOBBYIST SERVICES AND COMPENSATION PAID TO OTHERS:**

YEAR: _____
 Type of Report: January _____ July _____
 Period Covering: _____ through _____

LOBBYIST/EMPLOYEE LOBBYIST'S
 NAME: _____

OTHER COMPENSATION/RECEIPTS RECEIVED BY THE LOBBYIST AND/OR LOBBYIST EMPLOYEE AND PAID BY THE COMPENSATING REGISTRANT FOR LOBBYIST ACTIVITIES IN THE DISTRICT						TOTAL THIS PERIOD	CUMULATIVE TOTAL
EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
TOTAL OTHER COMPENSATION/RECEIPTS RECEIVED FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 8)						\$	\$

IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET A-1
 (SEE NEXT PAGE FOR INSTRUCTIONS)

BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY
LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE ___ OF ___
SCHEDULE A-2 LOANS RECEIVED BY THE LOBBYIST

YEAR: _____

Type of Report: January _____ July _____

Period Covering: _____ through _____

LOBBYIST/EMPLOYEE LOBBYIST
 NAME: _____

LOANS RECEIVED IN CONNECTION WITH LOBBYING ACTIVITY .						
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER					TOTAL LOANS THIS PERIOD TOTAL	CUMULATIVE LOAN TOTAL
LOAN						
\$	\$	\$	\$		\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER					TOTAL LOANS THIS PERIOD TOTAL	CUMULATIVE LOAN TOTAL
LOAN						
\$	\$	\$	\$		\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER					TOTAL LOANS THIS PERIOD TOTAL	CUMULATIVE LOAN TOTAL
LOAN						
\$	\$	\$	\$		\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER TOTAL					TOTAL LOANS THIS PERIOD TOTAL	CUMULATIVE LOAN TOTAL
LOAN						
\$	\$	\$	\$		\$	\$
TOTAL LOANS RECEIVED FOR THE PERIOD (CARRY TOTAL FORWARD TO LINE 9)					TOTAL LOANS THIS PERIOD TOTAL	CUMULATIVE LOAN TOTAL
					\$	\$

IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET
 (SEE REVERSE SIDE FOR INSTRUCTIONS)

BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY
COMPENSATING REGISTRANT'S ACTIVITY REPORT PAGE ___ OF ___
SCHEDULE B – EXPENDITURES PAID BY COMPENSATING REGISTRANT TO THE LOBBYIST
YEAR: 2013

Type of Report: January 2013 July _____

Period Covering: 7/1/12 through 12/31/12

COMPENSATING REGISTRANT'S NAME: Florida Avenue Residential, LLC, c/o The JBG Companies

PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES				
ACTIVITY EXPENSES INCURRED, OR PAID BY THE COMPENSATING REGISTRANT TO THE LOBBYIST AND/OR IN-HOUSE EMPLOYEE LOBBYIST FOR ACTIVITIES RELATIVE TO LOBBYING ACTIVITIES IN THE DISTRICT OF COLUMBIA.				
DATE	NAME AND ADDRESS OF PAYEE	PURPOSE OF COMPENSATION	TOTAL THIS PERIOD	CUMULATIVE TOTAL
			\$	\$
7/1-12/ 31/12	Holland & Knight, LLP/Christy Shiker, 800 17th Street, NW, Suite 1100 Washington, DC 20006	Alley Closing Legislation	1,617.00	
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
TOTAL EXPENDITURES PAID FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 11)			\$ 1,617.00	\$

IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET
 (SEE NEXT PAGE FOR INSTRUCTIONS)

BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY
LOBBYIST/COMPENSATING REGISTRANT'S ACTIVITY REPORT PAGE ___ OF ___
SCHEDULE B-1 -- OTHER EXPENDITURES
YEAR: 2013

Type of Report: January 2013 July _____

Period Covering: 7/1/12 through 12/31/12

COMPENSATING REGISTRANT'S NAME: _____

OTHER ACTIVITY EXPENSES INCURRED, OR PAID BY THE COMPENSATING REGISTRANT TO THE LOBBYIST AND/OR IN-HOUSE EMPLOYEE LOBBYIST FOR ACTIVITIES RELATIVE TO LOBBYING ACTIVITIES IN THE DISTRICT.				
DATE	NAME OF RECIPIENT	DESCRIPTION OF CONSIDERATION	TYPE OF COMPENSATION PAID (LOANS, CONTRIBUTION, GIFT, HONORARIA, ETC.)	TOTAL PAYMENT
				\$
7/1-12/31	Holland & Knight, LLP			0 \$
				\$
				\$
				\$
				\$
				\$
				\$
				0 \$
TOTAL OTHER EXPENDITURES PAID FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 12)				

- IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET TO SCHEDULE B-1
- IF YOU HAVE NOT PAID, INCURRED, OR ARRANGED ANY OTHER ACTIVITY EXPENSES DURING THE PERIOD, CHECK THE BOX TO INDICATE THAT YOU HAVE NOTHING TO REPORT

**BOARD OF ETHICS AND
GOVERNMENT
ACCOUNTABILITY
LOBBYIST ACTIVITY REPORT
SCHEDULE C** YEAR 2013
(See next page for Instructions)

Type of Report: January 2013 July _____

Covering Period 7/1/12 through 12/31/12

LOBBYIST/COMPENSATING'S REGISTRANT'S NAME: Florida Avenue Residential, LLC

DATE	NAME	NATURE OF EMPLOYMENT WITH REGISTRANT

I, the undersigned, declare under oath and on penalty of perjury that the statements contained on this Lobbyist Activity Report are to the best of my knowledge, true, correct, and complete.
Florida Avenue Residential, L.L.C., By: JBG Fund VII Corporate, L.L.C., its Managing Member, By: JBG/Company Manager III, L.L.C., its Managing Member,
By: [Signature], its Managing Member

Signature of Registrant (or, if not an individual, an authorized officer or agent* of registrant must sign).

*The lobbyist retained by contract to provide lobbying services may not sign on behalf of the compensating registrant.

Subscribed and sworn to before me on this 11th day of January, 2013

My commission Expires: _____

Marianne Caveny
Notary Public
Montgomery County, Maryland
My Commission Expires: 11/10/13

[Signature]
Notary Public