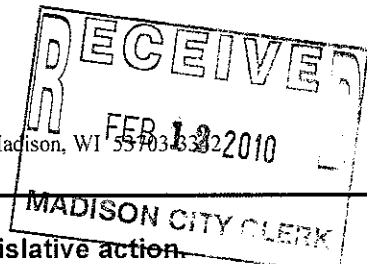


REGISTRATION OF LOBBYIST

Return to Office of the City Clerk, 210 Martin Luther King, Jr Blvd, Room 103, Madison, WI 53703



Section 1 -- Identification of Lobbyist
"Lobbyist" means any person paid to influence administrative or legislative action.

Springman Last Name Susan First Name _____ Title

401 North Carroll Street
Mailing Address

Madison City WI State 53703 Zip Code

Business Address (if different)

608-285-8090
Contact Phone

608-285-8085 Contact FAX sue@mullinsgroup.com Contact E-mail Address

Internet Address

Person to whom correspondence should be sent (if different from above)

Last Name _____
First Name

Firm or Organization Name

Mailing Address

City _____
State _____
Zip Code

Phone _____
FAX _____
E-mail Address

Section II -- Nature and Interest of Principal

Mullins Group LLC
Name of Principal

Designated Representative of Principal:

Mullins Last Name Carol M. First Name Member Title

401 North Carroll Street
Mailing Address

Madison City WI State 53703 Zip Code

Business Address (if different)

608-285-8090 Contact Phone NONE Contact E-mail Address

608-285-8085 Contact FAX NONE Internet Address

Check one of the following and complete only that section:

Business Entity

Real Estate Management, Leasing, Development
Describe the business activity in which the entity is engaged

Chief Executive Officer: Mullins Carol M. Member
Last First Title

If partnership or limited liability company, check here and attach list of partners/members.
Carol Mullins is the sole member.

Industry, Trade or Professional Association

Describe the industry trade or profession including any segment thereof which the association exclusively or primarily represents

Chief Executive Officer: _____
Last First Title

Approximate number of members: _____

Other Not for Profit

Labor Union Charitable/Religious/Civic, etc. Other

Briefly describe the organization's purpose and any other group with a common interest which the organization primarily represents

Describe any industry, trade, profession, or group with a common interest which the organization primarily represents or from which the organization's membership or financial support is primarily derived

Approximate number of members: _____

Individual

Name and address of the individual's employer if any or of the individual's primary place of business if self-employed

Describe the business activity in which the individual or the individual's employer is engaged

Section III -- Areas of Lobbying

Provide a reasonably specific narrative summary of areas of legislative and administrative action the principal may attempt to influence:

May need to speak to CITY staff in any agency that might handle our inquiries
or communications on assessments, codes, zoning, development, city plans or
services.

List the City agencies in which the principal seek to influence administration action:

All None Agencies listed below

Identify the proposed legislative or administrative action in connection with which the principal has made or intends to make a lobbying communication before December 31.

1. Item: Property Development/Values/Codes

a. How will this item affect the principal's business or other activity?

How we use, develop, maintain property

b. Which industry, trade, profession or segment or portion thereof would be principally affected?

c. If the item is an appropriation, please identify the City program or person for which the appropriation is proposed and the approximate amount, if you know the amount.

For additional items, attach additional sheets.

2. If lobbying communication relates to the capital or operating budget, identify topic or topics.

CAPITAL BUDGET

OPERATING BUDGET

| | |
|-------|-------|
| topic | topic |
| topic | topic |
| topic | topic |
| topic | topic |
| topic | topic |
| topic | topic |

Section IV - Authorization of Lobbyists

As a designated representative of the Principal, the Lobbyist named above is hereby authorized to lobby on behalf of the Principal.

- The lobbyist is an employee of the Principal.
- The lobbyist is also authorized to file expense reports or other filings on behalf of the Principal.

Dated: 2/11/10

Name: Carol M. Mullins

Position: Member

Signature: *Carol M. Mullins*

Section V -- Certification

I certify that the above is true and correct to the best of my knowledge, information and belief, and that I am the registrant or an authorized designee. I understand that I am subject to a forfeiture if I know or believe any of the above information not to be true

On Behalf of Lobbyist:

Susan Springman Signature Title _____

Susan Springman Type or print name as signed above 2-11-10 Date

Address & Telephone (if different from first page of this form)

On Behalf of Principal:

Carol M. Mullins Signature Title Member

Carol M. Mullins Type or print name as signed above 2/11/10 Date

Address & Telephone (if different from first page of this form)