
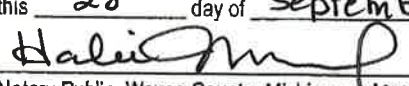


**CITY OF DETROIT OFFICE OF THE
DETROIT CITY CLERK
QUARTERLY REPORT**



**TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)**

SEP 28 A 8:17

1. LOBBYIST'S NAME <u>Charles John O'Byrne</u>	2. LOBBYIST'S ID NUMBER <u>2022-10</u>															
3. BUSINESS ADDRESS (All mail will be sent to this address) <u>The Related Companies LP.</u> <u>30 Hudson Yards, 7th Floor</u> <u>New York, NY 10001</u> <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) <u>412 801-3520</u> <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX															
5. DATE OF ANNUAL REGISTRATION <u>June 30 2022</u> <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input checked="" type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)															
7. NAME OF CLIENT <u>The Related Companies, LP.</u>																
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10. VERIFICATION I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. <u>Charles John O'Byrne</u> Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>28</u> day of <u>September</u> , 2022  Notary Public, Wayne County, Michigan <u>New York County, New York</u> My Commission Expires: <u>5/10/25</u>																
<div style="border: 1px dashed black; padding: 5px; width: fit-content; margin: auto;"> HALIE MARSDEN Notary Public - State of New York No. 01MA6417315 Qualified in New York County My Comm. Expires <u>May 10, 2025</u> </div>																
FOR OFFICIAL USE ONLY: Amount of fee paid _____ Date of payment _____																

CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

1. REGISTRANT'S NAME (Only one person may register with this form) Charles John O'Byrne		2. REGISTRANT'S ID NUMBER 2022-10	
3. BUSINESS ADDRESS (All mail will be sent to this address) The Related Companies, L.P. 30 Hudson Yards, 72nd Floor New York, NY 10001		4. TELEPHONE NUMBER(S) (212) 801 _____ () 3520 _____	
5. TYPE OF LOBBYIST (Check all applicable boxes.)			
<input type="checkbox"/> Registered lobbyist under Federal Law <input checked="" type="checkbox"/> Registered lobbyist under Michigan Law <input checked="" type="checkbox"/> Registered lobbyist in other states (name state(s)): <u>NY</u> <input type="checkbox"/> A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials <input type="checkbox"/> A person anticipating expenditures of more than \$250.00 over the next twelve (12) months for lobbying a single public official (See definition of "lobbyist" on reverse)			
6. NAME AND ADDRESS OF CLIENT(S) The Related Companies, L.P. 30 Hudson Yards, 72nd Floor New York, NY 10001			
7. VERIFICATION			
I swear, or affirm, that:			
a) During one (1) year preceding this registration, I have not held the position of Mayor, member of the City Council, City Clerk, appointive officer, or any member of a board, commission or other voting body that is established by either branch of City government or by the 2012 Detroit City Charter or under the 1984 Detroit City Code, or been a City appointee or City employee, or an individual who provided services to the City pursuant to a personal services contract; and			
b) All reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.			
Charles John O'Byrne			
Type or print name of registrant			
			
Signature			
Subscribed and sworn to me this sworn to before me			
this <u>27th</u> day of <u>June</u> , 20 <u>23</u>			
			
Notary Public, Wayne County, Michigan			
My Commission Expires: <u>6/21/2026</u>			

SAMANTHA S. HANZUTI
 NOTARY PUBLIC, STATE OF NEW YORK
 Registration No. 01HA6435129
 Qualified in NEW YORK County
 Commission Expires JUNE 21, 2026



FOR OFFICIAL USE ONLY:				
DATE OF ANNUAL REGISTRATION		THIS REGISTRATION IS VALID:		Amount of fee paid: \$125.00 Date of payment: 6/28/23
6	28	6	28	
Month	Day	Month	Day	
		2023	2024	
		Year	Year	

K₂

CITY OF DETROIT QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

CITY CLERK 2023 JUL 13 10:00 AM

1. LOBBYIST'S NAME <u>Charles John O'Byrne</u>	2. LOBBYIST'S ID NUMBER <u>2022-10</u>															
3. BUSINESS ADDRESS (All mail will be sent to this address) <u>The Related Companies, L.P.</u> <u>30 Hudson Yards, 12nd Floor</u> <u>New York, NY 10001</u> <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) <u>(212) 804 1320</u> <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX															
5. DATE OF ANNUAL REGISTRATION <u>6</u> / <u>30</u> / <u>2022</u> <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input checked="" type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)															
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10. VERIFICATION I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. <u>Charles John O'Byrne</u> <small>Type or print name of lobbyist</small>  <small>Signature of lobbyist</small> Subscribed and sworn to me this sworn to before me this <u>1st</u> day of <u>July 20, 2023</u>  <small>Notary Public, Wayne County, Michigan</small> My Commission Expires: <u>6/21/2026</u>																
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 5px;"> FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$ 25.00</u> </td> <td style="width: 40%; padding: 5px;"> Date of payment: <u>7/11/23</u> </td> </tr> </table>		FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$ 25.00</u>	Date of payment: <u>7/11/23</u>													
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CITY OF DETROIT QUARTERLY REPORT

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3. BUSINESS ADDRESS (All mail will be sent to this address) The Related Companies, 30 Hudson yards 72nd FL, New York, Ny 10001		4. TELEPHONE NUMBER(S) 212-801-3520																
<input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX																
5. DATE OF ANNUAL REGISTRATION <div style="display: flex; justify-content: space-around; align-items: center;"> 6 30 2023 </div> <div style="display: flex; justify-content: space-around; font-size: 0.8em; margin-top: 5px;"> Month Day Year </div> <p style="font-size: 0.8em; margin-top: 5px;">(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</p>		6. PERIOD FOR THIS REPORT <input checked="" type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)																
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FOR OFFICIAL USE ONLY: Amount of fee paid: \$25.00 Date of payment: 10/16/23 <div style="text-align: center; color: red; font-size: 1.5em; margin-top: 5px;">KW</div>																		

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QUARTERLY REPORT**

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RECEIVED APR 11 2024

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FOR OFFICIAL USE ONLY: <small>Amount of fee paid:</small> <u>\$25.00</u> <small>Date of payment:</small> <u>4/11/24</u> <div style="text-align: center; color: red; font-weight: bold; font-size: 1.2em;">KW</div>																

SAMANTHA S. HANZUTI
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