

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)


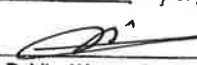
A 8:17

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, 72nd 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> Month Day Year (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>			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
9. EXPENDITURES BY CATEGORY		THIS REPORTING QUARTER	
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		9a. \$ <u>0.00</u>	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ <u>0.00</u>	
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ <u>0.00</u>	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ <u>0.00</u>	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		REGISTRATION DATE THROUGH END OF THIS QUARTER	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ <u>0.00</u>	
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 <u>[Signature]</u> Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>28</u> day of <u>September</u> , 2022 <u>Halie Marsden</u> Notary Public, Wayne County, Michigan New York County, New York My Commission Expires: <u>5/10/25</u>			
FOR OFFICIAL USE ONLY: Amount of fee paid _____ Date of payment _____			

HALIE MARSDEN
Notary Public - State of New York
No. 01MA6417315
Qualified in New York County
My Comm. Expires May 10, 2025

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.) <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> <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)): NY <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 <small>(See definition of "lobbyist" on reverse)</small> </div> <div style="width: 35%;"></div> </div>		
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. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> 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> </div> <div style="width: 35%; border: 1px solid black; padding: 5px; text-align: center;"> SAMANTHA S. HANZUTI NOTARY PUBLIC, STATE OF NEW YORK Registration No. 01HA6435129 Qualified in NEW YORK County Commission Expires JUNE 21, 2026 </div> </div>		
FOR OFFICIAL USE ONLY:		
DATE OF ANNUAL REGISTRATION <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">6 Month</div> <div style="text-align: center;">28 Day</div> <div style="text-align: center;">2023 Year</div> </div>	THIS REGISTRATION IS VALID: <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">From 6 Month</div> <div style="text-align: center;">28 Day</div> <div style="text-align: center;">2023 Year</div> </div> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">To 6 Month</div> <div style="text-align: center;">28 Day</div> <div style="text-align: center;">2024 Year</div> </div>	Amount of fee paid: \$125.00 Date of payment: 6/28/23

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)

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) 804-13520</u> <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;"> <u>6</u> Month <u>30</u> Day <u>2022</u> Year </div> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3rd Quarter (ending 9 months after annual registration) <input checked="" type="checkbox"/> 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT <u>The Related Companies LP</u>			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
9. EXPENDITURES BY CATEGORY		THIS REPORTING QUARTER	
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		REGISTRATION DATE THROUGH END OF THIS QUARTER	
9a. PAYMENTS TO OTHER PERSONS FOR LOBBYING		9a. \$ <u>0.00</u>	9a. \$ <u>0.00</u>
9b. ALL OTHER LOBBYING EXPENDITURES		9b. \$ <u>0.00</u>	9b. \$ <u>0.00</u>
9c. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)		9c. \$ <u>0.00</u>	9c. \$ <u>0.00</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)		9d. \$ <u>0.00</u>	9d. \$ <u>0.00</u>
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 <u>[Signature]</u> Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>1st</u> day of <u>July 20, 2023</u> <u>[Signature]</u> Notary Public, Wayne County, Michigan My Commission Expires: <u>6/21/2026</u>			
<div style="border: 1px solid black; padding: 5px; text-align: center;"> SAMANTHA S. HANZUTI NOTARY PUBLIC, STATE OF NEW YORK Registration No. 01HA6435129 Qualified in NEW YORK County Commission Expires JUNE 21, 2026 </div>			
FOR OFFICIAL USE ONLY: Amount of fee paid <u>\$ 25.00</u> Date of payment <u>7/11/23</u> <div style="text-align: center; color: red; font-weight: bold; font-size: 1.2em;">KW</div>			

CITY OF DETROIT QUARTERLY REPORT

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

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, 30 Hudson yards</u> <u>72nd FL, New York, NY 10001</u>		4. TELEPHONE NUMBER(S) <u>212-801-3520</u>											
<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 <u>6</u> <u>30</u> <u>2023</u> Month Day Year (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, L.P.</u>													
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.													
9. EXPENDITURES BY CATEGORY		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">THIS REPORTING QUARTER</th> <th style="width: 50%;">REGISTRATION DATE THROUGH END OF THIS QUARTER</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;"> 9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS 9a. \$ <u>0.00</u> </td> <td style="padding: 2px;"> 9a. \$ <u>0.00</u> </td> </tr> <tr> <td style="padding: 2px;"> 9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING 9b. \$ <u>0.00</u> </td> <td style="padding: 2px;"> 9b. \$ <u>0.00</u> </td> </tr> <tr> <td style="padding: 2px;"> 9c. ALL OTHER LOBBYING EXPENDITURES 9c. \$ <u>0.00</u> </td> <td style="padding: 2px;"> 9c. \$ <u>0.00</u> </td> </tr> <tr> <td style="padding: 2px;"> 9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c) 9d. \$ <u>0.00</u> </td> <td style="padding: 2px;"> 9d. \$ <u>0.00</u> </td> </tr> </tbody> </table>		THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER	9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS 9a. \$ <u>0.00</u>	9a. \$ <u>0.00</u>	9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING 9b. \$ <u>0.00</u>	9b. \$ <u>0.00</u>	9c. ALL OTHER LOBBYING EXPENDITURES 9c. \$ <u>0.00</u>	9c. \$ <u>0.00</u>	9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c) 9d. \$ <u>0.00</u>	9d. \$ <u>0.00</u>
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9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c) 9d. \$ <u>0.00</u>	9d. \$ <u>0.00</u>												
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 <u>[Signature]</u> Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>10th</u> day of <u>October</u> , <u>2023</u> Notary Public, Wayne County, Michigan <u>WY</u> My Commission Expires: <u>6/21/26</u>													
<div style="float: right; border: 1px solid black; padding: 5px; text-align: center;"> SAMANTHA S. HANZUTI NOTARY PUBLIC, STATE OF NEW YORK Registration No. 01HA6435129 Qualified in NEW YORK County Commission Expires JUNE 21, 2026 </div>													
FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$25.00</u> Date of payment: <u>10/16/23</u> <div style="text-align: center; color: red; font-weight: bold; font-size: 1.2em;">KW</div>													

CITY OF DETROIT
QUARTERLY REPORT

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

RECEIVED APR 11 2024

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, 72nd FL</u> <u>New York, NY 10001</u> <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) <u>(212)-801-3520</u> <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION <u>06</u> <u>28</u> <u>2023</u> Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1st Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4th Quarter (ending 12 months after annual registration)	
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9. EXPENDITURES BY CATEGORY		THIS REPORTING QUARTER	
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9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ <u>0.00</u>	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)		9d. \$ <u>0.00</u>	
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>10th</u> day of <u>April</u> , <u>2024</u> Notary Public, Wayne County, Michigan <u>New York, NY</u> My Commission Expires: <u>6/21/26</u>			
FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$25.00</u> Date of payment: <u>4/11/24</u> <u>KW</u>			

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

CITY OF DETROIT
LOBBYIST REGISTRATION
(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

RECEIVED JUL - 1 2024

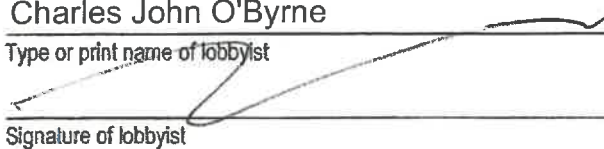

1. REGISTRANT'S NAME (Only one person may register with this form) <u>Charles John O'Byrne</u>	2. REGISTRANT'S ID NUMBER <u>2022 - 10</u>	
3. BUSINESS ADDRESS (All mail will be sent to this address) <u>The Related Companies L.P.</u> <u>30 Hudson Yards, 72nd FL</u> <u>New York, NY 10001</u>	4. TELEPHONE NUMBER(S) <u>212-801-3520</u>	
5. TYPE OF LOBBYIST (Check all applicable boxes.) <div style="display: flex; justify-content: space-between;"><div><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>New York</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)</div></div>		
6. NAME AND ADDRESS OF CLIENT(S) <u>The Related Companies, L.P.</u> <u>30 Hudson Yards, 72nd FL</u> <u>New York, NY 10001</u>		
7. VERIFICATION <p>I swear, or affirm, that:</p> <p>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</p> <p>b) All reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.</p> <p><u>Charles John O'Byrne</u> Type or print name of registrant</p> <p>_____ Signature</p> <p>Subscribed and sworn to me this sworn to before me this <u>27th</u> day of <u>June</u>, <u>2026</u></p> <p>_____ Notary Public, Wayne County, Michigan My Commission Expires: <u>New York NY</u> <u>6/21/26</u></p>		
FOR OFFICIAL USE ONLY:		
DATE OF ANNUAL REGISTRATION <u>7</u> / <u>1</u> / <u>2024</u> Month Day Year	THIS REGISTRATION IS VALID: From <u>7</u> / <u>1</u> / <u>2024</u> Month Day Year To <u>7</u> / <u>1</u> / <u>2025</u> Month Day Year	Amount of fee paid <u>\$ 125.00</u> Date of payment <u>7/1/24</u>

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

**CITY OF DETROIT
QUARTERLY REPORT**

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

RECEIVED JAN 13 2025

1. LOBBYIST'S NAME Charles John O'Byrne		2. LOBBYIST'S ID NUMBER 2022-10	
3. BUSINESS ADDRESS (All mail will be sent to this address) The Related Companies, 30 Hudson Yards, 72 FL, <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) () () <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;"><div>07 Month</div><div>1 Day</div><div>2024 Year</div></div> <p>(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</p>		6. PERIOD FOR THIS REPORT <div style="display: flex; flex-direction: column; gap: 5px;"><input type="checkbox"/> 1st Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4th Quarter (ending 12 months after annual registration)</div>	
7. NAME OF CLIENT The Related Companies. L.P			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <div style="display: flex; justify-content: space-between; align-items: flex-start;"><div style="width: 60%;"><input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.)</div><div style="width: 35%; text-align: center;"><input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.</div></div>			
9. EXPENDITURES BY CATEGORY		THIS REPORTING QUARTER	
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		9a. \$ 0.00	
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9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0.00	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0.00	
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. Charles John O'Byrne Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this 8 th day of January, 2025  Notary Public, Wayne County, Michigan - New York, NY My Commission Expires: 6/21/2026		<div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;">SAMANTHA S. HANZUTI NOTARY PUBLIC, STATE OF NEW YORK Registration No. 01HA6435129 Qualified in NEW YORK County Commission Expires JUNE 21, 2026</div>	
FOR OFFICIAL USE ONLY: <div style="display: flex; justify-content: space-between; align-items: center;"><div>Amount of fee paid: \$25.00</div><div>Date of payment: 1/13/25</div></div> <p style="text-align: center; color: red; font-weight: bold; font-size: 1.2em;">K6</p>			

CITY OF DETROIT QUARTERLY REPORT

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

RECEIVED APR 02 2025

1. LOBBYIST'S NAME Charles John O'Byrne		2. LOBBYIST'S ID NUMBER 2022-10	
3. BUSINESS ADDRESS (All mail will be sent to this address) The Related Companies, 30 Hudson Yards, 72 FL, <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) () _____ () _____ <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;"> 07 1 2024 </div> <div style="display: flex; justify-content: space-around; font-size: small;"> Month Day Year </div> <p>(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</p>		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 checked="" 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 The Related Companies, L.P			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) </div> <div style="display: flex; justify-content: center;"> <input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER. </div>			
9. EXPENDITURES BY CATEGORY		THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		9a. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 0	9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0	9c. \$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0	9d. \$ 0
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. <div style="display: flex; align-items: center;"> <div style="text-align: center; margin-right: 20px;"> <u>Charles John O'Byrne</u> Type or print name of lobbyist </div> <div style="text-align: center;"> Signature of lobbyist </div> </div> Subscribed and sworn to me this sworn to before me this <u>1st</u> day of <u>April</u> , <u>2025</u> <div style="display: flex; align-items: center; margin-top: 10px;"> <div style="text-align: center; margin-right: 20px;"> Notary Public, Wayne County, Michigan <u>New York, NY</u> My Commission Expires: <u>6/21/2026</u> </div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> SAMANTHA S. HANZUTI NOTARY PUBLIC, STATE OF NEW YORK Registration No. 01HA6435129 Qualified in NEW YORK County Commission Expires JUNE 21, 2026 </div> </div>			
FOR OFFICIAL USE ONLY: <div style="display: flex; justify-content: space-between;"> <div>Amount of fee paid: <u>\$25.00</u></div> <div>Date of payment: <u>4/2/25</u></div> </div> <div style="text-align: center; margin-top: 10px;"> <u>KG</u> </div>			

RECEIVED APR 02 2025

**CITY OF DETROIT
SUPPLEMENT TO LOBBYIST REGISTRATION
TO ADD OR REMOVE CLIENTS**

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</u> <u>30 Hudson Yards, 72nd FL</u> <u>New York, NY 10001</u> <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) () () <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX
5. NAME AND ADDRESS OF CLIENT(S) <input checked="" type="checkbox"/> Effective <u>4-1-2025</u> I do not represent the following client(s): <u>The Related Companies, L.P.</u> <input type="checkbox"/> Effective _____, I represent the following client(s): <u>None -</u>	
6. VERIFICATION <p>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.</p> <p><u>Charles John O'Byrne</u> Type or print name of lobbyist</p> <p>_____ Signature of lobbyist</p> <p>Subscribed and sworn to me this sworn to before me this <u>1st</u> day of <u>April</u> <u>2025</u></p> <p>_____ Notary Public, Wayne County, Michigan <u>New York, NY</u> My Commission Expires: <u>6/21/2026</u></p> <div style="border: 1px solid black; padding: 5px; width: fit-content;"><p>SAMANTHA S. HANZUTI NOTARY PUBLIC, STATE OF NEW YORK Registration No. 01HA6435129 Qualified in NEW YORK County Commission Expires JUNE 21, 2026</p></div>	
FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$15.00</u> Date of payment: <u>4/2/25</u> <u>KW</u>	