

Laguna Beach

1450051

Statement of Organization Recipient Committee

Statement Type

Initial [X], Amendment [], Termination - See Part 5 []
Not yet qualified or
Date qualification threshold met
07 / 07 / 2022

RECEIVED AND FILED in the office of the Secretary of State of the State of California
JUL 15 2022
CALIFORNIA FORM 410
For Official Use Only
JUL 26 2022
REGISTRAR OF VOTERS

1. Committee Information I.D. Number (if applicable) PENDING
2. Treasurer and Other Principal Officers Deputy

NAME OF COMMITTEE
PROTECT AND KEEP LAGUNA LOCAL, SPONSORED BY REGENCY PROPERTIES, L.P. AND DTRS MLB, LLC
STREET ADDRESS (NO P.O. BOX)
1278 GLENNEYRE ST., #459
CITY STATE ZIP CODE AREA CODE/PHONE
LAGUNA BEACH CA 92651 (213) 624-6200
FULL MAILING ADDRESS (IF DIFFERENT)
515 S. FIGUEROA ST., STE. 1110 LOS ANGELES, CA 90071
E-MAIL ADDRESS (REQUIRED)/ FAX (OPTIONAL)
sosfilings@politicallaw.com / (213) 623-1692
COUNTY OF DOMICILE JURISDICTION WHERE COMMITTEE IS ACTIVE
ORANGE CITY OF LAGUNA BEACH

NAME OF TREASURER
CARY DAVIDSON
STREET ADDRESS (NO P.O. BOX)
515 S. FIGUEROA ST., STE. 1110
CITY STATE ZIP CODE AREA CODE/PHONE
LOS ANGELES CA 90071 (213) 624-6200
NAME OF ASSISTANT TREASURER, IF ANY
MICHAEL FARR
STREET ADDRESS (NO P.O. BOX)
515 S. FIGUEROA ST., STE. 1110
CITY STATE ZIP CODE AREA CODE/PHONE
LOS ANGELES CA 90071 (213) 624-6200
NAME OF PRINCIPAL OFFICER(S)
JOHN DOANE
STREET ADDRESS (NO P.O. BOX)
1278 GLENNEYRE ST., #459
CITY STATE ZIP CODE AREA CODE/PHONE
LAGUNA BEACH CA 92651 (213) 624-6200

Attach additional information on appropriately labeled continuation sheets.

3. Verification

I have used all reasonable diligence in preparing this statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 7/8/2022 By [Signature]
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER
Executed on By
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT
Executed on By
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT
Executed on By
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

**Statement of Organization
Recipient Committee**

INSTRUCTIONS ON REVERSE

COMMITTEE NAME

PROTECT AND KEEP LAGUNA LOCAL, SPONSORED BY REGENCY PROPERTIES, L.P. AND DTRS MLB, LLC

I.D. NUMBER

PENDING

2a. Additional Officers / Assistant Treasurers

NAME

MARY ROGERS

MAILING ADDRESS

1278 GLENNEYRE ST., #459

CITY STATE ZIP CODE AREA CODE/PHONE

LAGUNA BEACH CA 92651 (213) 624-6200

NAME

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

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**Statement of Organization
Recipient Committee**

INSTRUCTIONS ON REVERSE

COMMITTEE NAME PROTECT AND KEEP LAGUNA LOCAL, SPONSORED BY REGENCY PROPERTIES, L.P. AND DTRS MLB, LLC	I.D. NUMBER PENDING
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- All committees must list the financial institution where the campaign bank account is located.

NAME OF FINANCIAL INSTITUTION CALIFORNIA BANK & TRUST	AREA CODE/PHONE (213)228-1710	BANK ACCOUNT NUMBER 5800689092
ADDRESS 550 S. HOPE ST., #100	CITY LOS ANGELES	STATE ZIP CODE CA 90071

4. Type of Committee Complete the applicable sections.

Controlled Committee

- List the name of each controlling officeholder, candidate, or state measure proponent. If candidate or officeholder controlled, also list the elective office sought or held, and district number, if any, and the year of the election.
- List the political party with which each officeholder or candidate is affiliated or check "nonpartisan." Stating "No party preference" is acceptable.
- If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT	ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION	PARTY		(list political party below)
			CHECK ONE		
			Nonpartisan	Partisan	
			Nonpartisan	Partisan	

Primarily Formed Committee Primarily formed to support or oppose specific candidates or measures in a single election. List below:

CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER) IF A RECALL, STATE "RECALL" IN FRONT OF THE OFFICEHOLDER'S NAME.	CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHECK ONE	
		SUPPORT	OPPOSE
HOSPITALITY WORKING CONDITIONS	CITY OF LAGUNA BEACH		X
HOTEL DEVELOPMENT OVERLAY ZONING DISTRICT	CITY OF LAGUNA BEACH		X

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COMMITTEE NAME

PROTECT AND KEEP LAGUNA LOCAL, SPONSORED BY REGENCY PROPERTIES, L.P. AND DTRS MLB, LLC

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PENDING

4. Type of Committee (Continued)

General Purpose Committee

Not formed to support or oppose specific candidates or measures in a single election. Check only one box:

CITY Committee

COUNTY Committee

STATE Committee

PROVIDE BRIEF DESCRIPTION OF ACTIVITY

Sponsored Committee

List additional sponsors on an attachment.

NAME OF SPONSOR

REGENCY PROPERTIES, L.P.

INDUSTRY GROUP OR AFFILIATION OF SPONSOR

HOSPITALITY

STREET ADDRESS

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE/PHONE

1555 S. COAST HIGHWAY

LAGUNA BEACH

CA

92651

(888) 579-8544

Small Contributor Committee

_____/_____/_____
Date qualified

5. Termination Requirements

By signing the verification, the treasurer, assistant treasurer and/or candidate, officeholder, or proponent certify that all of the following conditions have been met:

- This committee has ceased to receive contributions and make expenditures;
 - This committee does not anticipate receiving contributions or making expenditures in the future;
 - This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
 - This committee has no surplus funds; and
 - This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions.
- There are restrictions on the disposition of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.
- Leftover funds of ballot measure committees may be used for political, legislative or governmental purposes under Government Code Sections 89511 - 89518, and are subject to Elections Code Section 18680 and FPPC Regulation 18521.5.

**Statement of Organization
Recipient Committee**

STATEMENT OF ORGANIZATION

**CALIFORNIA
FORM 410**

INSTRUCTIONS ON REVERSE

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COMMITTEE NAME

PROTECT AND KEEP LAGUNA LOCAL, SPONSORED BY REGENCY PROPERTIES, L.P. AND DTRS MLB, LLC

I.D. NUMBER

PENDING

Sponsored Committee List additional sponsors on an attachment.

NAME OF SPONSOR DTRS MLB, LLC		INDUSTRY GROUP OR AFFILIATION OF SPONSOR HOSPITALITY		
MAILING ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE
	30801 S. COAST HIGHWAY	LAGUNA BEACH	CA	92651 (866) 271-6953
NAME OF SPONSOR		INDUSTRY GROUP OR AFFILIATION OF SPONSOR		
MAILING ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE
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