

**Statement of Organization
Recipient Committee**

Statement Type

<input type="checkbox"/> Initial <input type="radio"/> Not yet qualified or <input type="radio"/> Date qualification threshold met ____/____/____	<input checked="" type="checkbox"/> Amendment Date qualification threshold met 07 / 07 / 2022	<input type="checkbox"/> Termination – See Part 5 Date of termination ____/____/____
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Date Stamp
RECEIVED

AUG 05 2022

City Clerk's Office
City of Laguna Beach, CA

CALIFORNIA FORM 410
For Official Use Only

1. Committee Information	2. Treasurer and Other Principal Officers
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I.D. Number (if applicable) 1450051

NAME OF COMMITTEE
PROTECT AND KEEP LAGUNA LOCAL, SPONSORED BY REGENCY PROPERTIES, L.P. AND AFFILIATED ENTITIES 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 ORANGE	JURISDICTION WHERE COMMITTEE IS ACTIVE CITY OF LAGUNA BEACH
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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

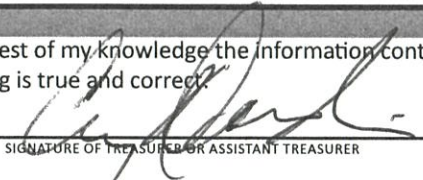
NAME OF PRINCIPAL OFFICER(S)
JOHN DOANE

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 8/3/2022 By 
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**

**CALIFORNIA
FORM 410**

INSTRUCTIONS ON REVERSE

Page 2 of 5

COMMITTEE NAME

I.D. NUMBER

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

1450051

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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COMMITTEE NAME

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I.D. NUMBER

1450051

- All committees must list the financial institution where the campaign bank account is located.

NAME OF FINANCIAL INSTITUTION	AREA CODE/PHONE	BANK ACCOUNT NUMBER		
CALIFORNIA BANK & TRUST	(213) 228-1710	5800689092		
ADDRESS	CITY	STATE	ZIP CODE	
550 S. HOPE ST., #100	LOS ANGELES	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 CHECK ONE		(list political party below)
			Nonpartisan	Partisan	
			Nonpartisan	Partisan	(list political party below)
			Nonpartisan	Partisan	(list political party below)

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

**Statement of Organization
Recipient Committee**

INSTRUCTIONS ON REVERSE

CALIFORNIA FORM 410
Page 4 of 5
I.D. NUMBER 1450051

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

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. AND AFFILIATED ENTITIES		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.

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INSTRUCTIONS ON REVERSE

Page 5 of 5

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1450051

Sponsored Committee List additional sponsors on an attachment.

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