

2009 P6 Client Periodic Report/Lobbyist Annual Report

Lobbyist Name: Bolton-St. Johns LLC

Client Name: N.S.P. ENTERPRISES, INC

Lobbyist Information

Principal Officer Name McCarthy, Bill

Principal Officer Title Partner

Principal Officer Email BLOCKED_EMAIL

Principal Officer Phone (518) 462-4620

Lobbyist Business Name Bolton-St. Johns LLC

Lobbyist Business Address 146 State St., Lower Level, Albany, NY 12207

Lobbyist Business Phone (518) 462-4620

Client Information

Client Name N.S.P. ENTERPRISES, INC

Business Address 247 52ND STREET, BROOKLYN, NY 11220

Client P.O. Name PLAKOUDAS, NICK

Business Phone (718) 492-7990

Business Email BLOCKED_EMAIL

Employee(s) Lobbying for Client

Employee # 1

Employee's Name DeRosa, Giorgio

Employee's Work Address 146 State St., Albany, NY 12207

Employee's Work Phone (518) 462-4620

Summary of Compensation

Total Compensation Paid or Owed for Current Period \$0.00

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Year to Date Total Compensation Paid or Owed	\$10,000.00
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Lobbying Expenses

Aggregate of all expenses for salaries of support staff	\$0.00
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Total of Aggregate Expenses \$75.00 or less	\$0.00
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Are there expenses greater than \$75.00?	No
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Itemized Expense Total	\$0.00
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Total Expenses for Current Period	\$0.00
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Year to Date Total of Expenses	\$0.00
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Lobbyist Name: Bolton-St. Johns LLC

Client Name: N.S.P. ENTERPRISES, INC

CERTIFICATION

I certify that all statements made on this report are true and correct to the best of my knowledge and belief, and I understand that the willful false statement of any material fact herein will subject me to the provisions of law relevant to the making of false instruments and will render such statement null and void.

Principal Officer Name	McCarthy, Bill
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Principal Officer Email	BLOCKED_EMAIL
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Certification Date	01/25/2010 20:31
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ELECTRONIC SIGNATURE

Bill McCarthy was required to indicate acceptance of the representations made in the following statement by entering his or her password used to access the E-Lobbyist, New York City Lobbyist Filing System and pressing the Submit button to affix his or her electronic signature and file the report with the Office of City Clerk - City of New York.

"I certify that all statements made on this report are true and correct to the best of my knowledge and belief, and I understand that the willful false statement of any material fact herein will subject me to the provisions of law relevant to the making of false instruments and will render such statement null and void."