FORM 1 STATEMENT OF 2000 FINANCIAL INTERESTS						
LAST NAME — FIRST NAME — MIDDI	I F NAMF	NAME OF REPORTING PE	RSON'S	AGENCY:		
Andress, Noel E.		LOCAL PLANNING A GENCY				
MAILING ADDRESS:		CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):				
P.O. BOX 420		☑ LOCAL OFFIC		STATE OFFICER		
fineland, FL 3	CANDIDATE LIST OFFICE OR POSITIO		SPECIFIED STATE EMPLOYEE			
CITT.	COUNTY:		TTILLD C			
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (check one): DECEMBER 31, 2000 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS: PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VAL-UES. BEGINNING IN 2001, THE LEGISLATURE HAS ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATE-MENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS (old method) OR DOLLAR VALUE THRESHOLDS (new method)						
PART A PRIMARY SOURCES OF IN NAME OF SOURCE OF INCOME	reporting person] I'S DESCRIPTION OF THE SOURCE'S I PRINCIPAL BUSINESS ACTIVITY					
Howard Road Envi	IN WilliamsvilleNY Palm Grove Company					
		Pinelandel Real Estate SALES				
KAPT LimitedPartn	, 1	Pineland, FL		nuestment Proporties		
PINETree Center LF		Pineland, FL.		cestment Properties		
		7				
<u></u>						
PART B SECONDARY SOURCES O	F INCOME [Major customers, clients,	and other sources of income to	business	es owned by the reporting person]		
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS'S INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
Veterans Blud Invest.	3005 Caring Way	Real Estate So	رما	Investment Propertie		
/	Port Charlotte, 22					
PART C REAL PROPERTY [Land, buildings owned by the reporting person]				FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
10. Mg EO to 2 Jul				RUCTIONS on who must file		
S40				orm and how to fill it out begin ge 3 of this packet.		
30 ROSP 939N2				ER FORMS you may need to		
BECEIVED				e described on page 6.		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE J BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
			.,,			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
BUSINESS ENT		TTY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY						
ADDRESS OF BUSINESS ENTITY						
PRINCIPAL BUSINESS ACTIVITY						
POSITION HELD WITH ENTITY						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS						
NATURE OF MY OWNERSHIP INTEREST						
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						



7-2-01

FILING INSTRUCTIONS:

WHAT TO FILE:

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

NOTE: MULTIPLE FILING UNNECES-SARY:

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

WHERE TO FILE:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers file with the Supervisor of Elections of the county in which you permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709.

Candidates file this form together with your qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

WHEN TO FILE:

Initially, each local officer, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

Noel Andress

Tax ID#
28442200000280070
14452200000020040
14452200000020050
18442102000010240
28442200000280000
284422050000A0160
05442201000230590
0038728-002000-7 0037812-000000-0 0037813-000000-9 0037814-000000-8 0038728-003000-5 0070564-002430-7 0037777-000000-3 0037778-000000-2 0037779-000000-1
1122088317
13442100000050280

ON SUPERVISOR OF SUPERVISOR OF A 03 PM '01