FORM 1 STATEMENT OF			2008			
Please print or type your name, mailing address, agency name, and position below:	5 /					
LAST NAME FIRST NAME MIDDLE NAME BARTON J	A DIVAC	FOR OF USE ON				
MAILING ADDRESS: 5718, Dift. 2000 Place			1 ID Code	-		
· • •	COUNTY : 1					
city: Cape Conal 3:	_02_					
NAME OF AGENCY: Lee Co. Induct	-thu	IDNo. Cont Code P. Req. Code				
NAME OF OFFICE OR POSITION HELD OR S		P. Red. Code	-			
You are not limited to the space on the lines on th CHECK ONLY IF CANDIDATE OR	is form. Attach additional sheets,		r Secor			
BOTH PARTS OF THIS SECTION MUST BE COMPLETED 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, 2008 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:						
MANNER OF CALCULATING REPORTABLE INTERESTS: THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one): Image: Comparative (PERCENTAGE) THRESHOLDS OR Image: Comparative check one)						
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]						
	SOUF ADDF 2534 NE C		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
No. Cape Ind. Ital Phile	Corpo Coras	-	Jand development	$\tilde{\tau}$		
Bytando Rop. Corp	<u> </u>		Induction Korvier	<i>61</i> 0		
gaspana anati						
PART B SECONDARY SOURCES OF INCO			o businesses owned by the reporting perso			
		ADDRESS OF SOURCE				
No Cape I not Plaine Va	rious buigous	AU A	Jard darelo	fruer		
Dybude rop lorp an	nual bases		KOLUGUD			
PART C REAL PROPERTY [Land, buildings owned by the reporting person]			FILING INSTRUCTIONS for y and where to file this form are loo ed at the bottom of page 2.			
312, SE 51 Que Cape Concel FI			INSTRUCTIONS on who must	file		
318, SE 5th ave in it is 1 6301 Hain SV Balcolia 33922			this form and how to fill it out be on page 3.			
914, NE 24th bare # 8 9. Cape Coral \$1.3395			OTHER FORMS you may need file are described on page 6.	l to		
CE FORM 1 - Eff. 1/2009 (Continued on reverse side)				AGE 1		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]						
	TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
	e Shares No.	Cape had that P	×			
Stock Bestande Prop. 620						
¥	Gui	Gulecoard Construction of Sto-Il be				
ų	Ve (Do Cano Poiede LLC				
· · · · · · · · · · · · · · · · · · ·						
PART E — LIABILITIES [Major debts]						
NAME OF CREDITOR ADDRESS OF CREDITOR						
Busey Back Summerlie Jalos Dr. St. Kuse						
3						
		,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	······································			
			<u> </u>			
PART F INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY	NA	AU	AN A			
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						
SIGNATURE (required):	GNATURE (required): 6/10/09					
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.

if you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

NOTE:

MULTIPLE FILING UNNECESSARY:

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.

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/employees file with the Supervisor of Elections of the county in which they 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; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

Candidates file this form together with their qualifying papers.

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

Initially, each local officer/employee, 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 qualitying papers.

Thereafter, local officers/employees, 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/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.