FORM 1	STATEN	AENT OF		2004	
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERESTS					
LAST NAME FIRST NAME MIDDLE I BIBCH THOM MAILING ADDRESS :	MAS B.	FOR O USE O		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
FORT MXE/AS, FL. 33906			ID Code		
	ZIP: COUNTY:	FLAMANCE	ID NO.	× 200	
NAME OF OFFICE OR POSITION HELD	OR SOUGHT :	YEAS PLAT	P. Req. Code	OARD	
	FORT MYEA		F 77 UN 15	PDF 2004	
	**BOTH PARTS OF THIS SE		**		
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FII A FISCAL PEAR. PLEASE STATE BELO DECEMBER 31, 2004	W WHETHER THIS STATEMEN	PRECEDING TAX YEAR, WHE IS FOR THE PRECEDING TAX	YEAR ENDING EITH	ER (check one):	
MANNER OF CALCULATING REPORTA THE LEGISLATURE ALLOWS FILERS REQUIRES FEWER CALCULATIONS, C	THE OPTION OF USING REP OR USING COMPARATIVE THR	ESHOLDS, WHICH ARE USUA	LLY BASED ON PER	DLLAR VALUES, WHICH CENTAGE VALUES (see	
instructions for further details). PLEASE COMPARATIVE (PERCENTAGE)				RESHOLDS	
PART A PRIMARY SOURCES OF INC NAME OF SOURCE OF INCOME				DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
THE BIACH COM	MANY BEALTON	<u>RS-7370 CO</u>	LIFGEPH	Y FTM 33907	
METAO DANIELS, BELATAIX COAPON	[NK 574]	ME SAME	COMMER	KING PIOPERTY ME	
	IL AEAL EST	ATE LISTED	IN PAT	gTICII	
PART B SECONDARY SOURCES OF NAME OF BUSINESS ENTITY	INCOME [Major customers, clien NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ts, and other sources of income ADDRESS OF SOURCE	I PF	y the reporting person] RINCIPAL BUSINESS CTIVITY OF SOURCE	
STOCKS & BON	DS AT!				
UBS PAINEUR	EBBER				
SANIBEL CART	IVIA TAUST				
	ildings owned by the reporting pe	rson]	FILING INST	RUCTIONS for when	
PART C REAL PROPERTY [Land, buildings owned by the reporting person] 1400 REFIHMOD TRAIL - FTM - FL - HOME ed at the bottom of page 2.					
LAND-1-75 & PAL	M BEACH BLU	D 100%		NS on who must file ow to fill it out begin	
WAAEHOUSE 12,70 WAREHOUSE	1 METAD P 680 MET	KY - FTM BD PKY-FTM	OTHER FOR file are describe	MS you may need to ed on page 6.	
	on reverse side) ASTESTATES	- FTM		PAGE 1	

PART D — INTANGIBLE PERSONAL PROPERTY TYPE OF INTANGIBLE	[Stocks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
STALKS & RANIAS	A7:		
NRS DAINFMERR	FA		
SANREL CADTIN	ATRUST		
RANT DE AMEN	ICA		
PART E — LIABILITIES [Major debts]			
NAME OF CREDITOR	ADDRESS OF CREDITOR		
WELLSFARBO BANK	- 1499 BEECHWOOD TR. HOME		
COLUMBIAN LIFE	INS. CO. 7370 COLLEGE PKY.		
PART F INTERESTS IN SPECIFIED BUSINESSES	S [Ownership or positions in certain types of businesses]		
	ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	STATE VANVESTMENTS - SEE 11C 11		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS	RIACH COMPANY . REALTORS		
POSITION HELD WITH ENTITY	COLLEGE PAX # 200		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	37007		
NATURE OF MY	DENT 100%		
IF ANY OF PARTS A THROUGH F	ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE		
SIGNATURE (required):	DATE SIGNED (required): 4/11/10		
nomo	<u>6 11 1/7/05</u>		
	FILING INSTRUCTIONS:		
WHAT TO FILE: After completing all parts of this form, including signing and dating it, send back only the first	WHERE TO FILE: WHEN TO FILE: If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections Initially, each local officer/employee, state officer, and specified state employee must		
sheet (pages 1 and 2) for filing.	for your annual disclosure filing, return the form		

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 gualifying.

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.

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/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.