FORM 1	STATEM	IENT OF	2010
Please print or type your name, mailing address, agency name, and position below	FINANCIAL	INTERESTS	S
LAST NAME - FIRST NAME - MIDDLE BIRCH THOMAS MAILING ADDRESS: 7370 COLLIE	NAME: S B FOE PKY #2	FOR OF USE ON	NLY:
EODT MXERS CITY: CHAME OF AGENCY: COUNT	TEL. 3390 TZIP COUNTY THOUSING FA	107-LEF MANCE THOMITY	ID Code ID No. Conf. Code
NAME OF OFFICE OR POSITION HELI	OR SOUGHT:	- ADJUSTMENTS	P. Req. Code
You are not limited to the space on the line CHECK ONLY IF CANDIDATE	s on this form. Attach additional sheets. OR NEW EMPLOYEE OR A	, if necessary.	ří F
	**BOTH PARTS OF THIS SECTI		் ப
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FILE A FISCAL YEAR. PLEASE STATE BELO DECEMBER 31, 2010	W WHETHER THIS STATEMENT IS		
REQUIRES FEWER CALCULATIONS, C instructions for further details). PLEASE	THE OPTION OF USING REPORT OR USING COMPARATIVE THRESH	HOLDS, WHICH ARE USUALLY ATEMENT REFLECTS EITHER	RE ABSOLUTE DOLLAR VALUES, WHICH Y BASED ON PERCENTAGE VALUES (see (must check one):
COMPARATIVE (PERCENTAGE)			ALUE THRESHOLDS
•	ort, you must write "none" or "n/a")		. •
NAME OF SOURCE OF INCOME	<u> </u>	RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
THE BIACH COMPO	WY BEALTOMS.	7370 6011	ESF PHX-FTM
METING-UTINIELS,	ADDADATION (SAME DOM	
ALL BEAL FO	TATE 1167	FO IN P	9BT 11/11
	F INCOME [Major customers, clients, ort, you must write "none" or "n/a"		businesses owned by the reporting person]
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
STOCKS AND B	WOS AT: 5	INTAUST - F	UAT MYEAS UBS
FORT MYEAS,	SANIBEL CAP	TIVA TAUST	F, FORT MYEBS
BANK OF AM	EBICA - BELL	TOWER, FL	OAT MYFAS
PART C REAL PROPERTY [Land, but (If you have nothing to repo	ilidings owned by the reporting persor rt, you must write "none" or "n/a")		FILING INSTRUCTIONS for when and where to file this form
11271 GAFENSEN	OGE LANDING, F	TM 33908-HOP	are located at the bottom of page 2.
OFFICE BUILDING 7	370 COLLEGE	PKY-ETM-339	JNSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
WAMEHOUSE-127 55% WAMEHOUSE	01 ME/MO-KK = 11,680 MEZ	PAD PKY-FTA	OTHER FORMS you may need to file are described on page 6.

F	ART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] (If you have nothing to report, you must write "none" or "n/a")			
	TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
4	FOCKS & BONDS AT: SUNTAUST BANK-FTM FL., UBS			
	ETM. SHUBEL CAPTIVE TRUST FOR BANK OF			
	AMERICA - RELITAGER - ITM			
	THE PETETOWERS FOR			
F	ART E — LIABILITIES [Major debts] (If you have nothing to report, you must write "none" or "n/a")			
	NAME OF CREDITOR ADDRESS OF CREDITOR			
	OLUMBIA LIFE MSUBANCE CO 7370 COLLEGE PK			
)				
П				
F	ART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses] (If you have nothing to report, you must write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3			
	AME OF BUSINESS ENTITY REAL ESTATE INVESTMENTS - SEE - "C"			
A	DDRESS OF BUSINESS ENTITY AND			
F	RINCIPAL BUSINESS ACTIVITY THE BIRCH COMPANY - MAALTORS			
F	DISTION HELD WITH ENTITY 5370 (OLAFGE PTY#210)			
	DWN MORE THAN A 5% TEREST IN THE BUSINESS F7M 3390 7			
	ATURE OF MY WHERSHIP INTEREST PRESIDENT 100%			
	IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE			
*,	IGNATURE (required): Manual Bush DATE SIGNED (required): 7/1/11			
П	FILING INSTRUCTIONS:			
	VHAT TO FILE: WHEN TO FILE:			
1 1	fter completing all parts of this form, including If you were mailed the form by the Commission Initially, each local officer/employee, state and dating it send back only the first on Ethics or a County Supervisor of Elections for officer, and specified state employee must			

neet (pages 1 and 2) for filing.

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

acsimiles will not be accepted.

IULTIPLE FILING UNNECESSARY:

enerally, a person who has filed Form 1 for a alendar or fiscal year is not required to file a econd Form 1 for the same year. However, a andidate who previously filed Form 1 because f another public position must at least file a copy f his or her original Form 1 when qualifying.

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.

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.

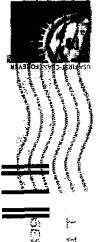
Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

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.



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SUPERVISOR OF ELECTIONS P.O. BOX 2545 FORT MYERS FL 33902-2545

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