FORM 1 F

FINAL STATEMENT OF FINANCIAL INTERESTS

CoE1	

2010

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)											
LAST NAME — FIRST NAME — MIDDLE NAME:		NAME OF REPORTING PERSON'S AGENCY:									
Bowe, Harold J.				Boca Grande Fire Control District							
MAILING ADDRESS:					CHECK ON	E OF TH	E FOLI	LOWING	see "Who	Must File" (on page 3):
P.O. Box 4				LOCAL OFFICER STATE OFFICER SPECIFIED STATE EMPLOYEE							
CITY: ZIP:	ZIP: COUNTY: LIST OFFICE OR POSITION HELD: Seat #3										
	33921		EE		Boca Grande Fire Control District				rict		
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FIL OFFICE OR EMPLOYMENT DESCRIP	NANCIAL BED ABC	INTEREST	TS FOR TH H DATE W	IE PERIO	D BETWEEN D BETWEEN	JANUAR	j -		HE LAST		D THE PUBLIC or to 12/31/10)
THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS, HAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASES ON FERCEN AGE VALUES (See in tructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):											
COMPARATIVE (PERC	CENTAGE) THRESH	IOLDS		QR		DOL	LAR VALU	E THRES	SHOLD	<u> </u>
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] (If you have nothing to report, you must write "none" or "n/a")											
			SOURC ADDRE								
					Cleari	ng					
Bowe's Boat Storage		P	O Box	878,	Placid	a,FL	339	46	Boat	Storag	re
			_								
			-								
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by reporting person] (If you have nothing to report, you must write "none" or "rula")									porting person]		
· · · · · · · · · · · · · · · · · · ·			OF MAJOR SOURCES BUSINESS' INCOME		ADDRESS OF SOURCE		PRINCIPAL E ACTIVITY OF				
					<u> </u>						
											
PART C REAL PROPERTY [Land, buildings owned by the reporting person] (If you have nothing to report, you must write "none" or "n/a") FILING INSTRUCTIONS for when and where to file this for located at the bottom of page						nis form are					
311 Palm Ave., Boca Grande, FL						INSTRUCTIONS on who must file					
5001 Woodfiled Rd., Placida, FL									how to fill his packet	it out begin	
5000 Lindwood Rd., Placida, FL OTHER FORMS you may nee						nav naed to					
6347 SW Smith Ave.	Arc	adia,	FL							bed on pag	

PART 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 INTANO	IGIBLE I BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
		<u> </u>			10			
				·	20 20 20 20 20 20 20 20 20 20 20 20 20 2			
					<u>À</u>			
PART E — LIABILITIES [Major debts] (If you have nothing to report, you must write "none" or "n/a")								
NAME OF CRED								
First Community	Bank	1950 Tam	iami Trail, Port (nariotte, Fi	L 33948			
PART 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 ENTI		BUSINESS ENTITY # 2		S ENTITY # 3			
NAME OF BUSINESS ENTITY	Bowe's Tracto	r Service	Bowe's Boat Storag					
ADDRESS OF BUSINESS ENTITY	PO Box 878, P.	lacida,FL	PO Box 878, Placia	ı,FL				
PRINCIPAL BUSINESS ACTIVITY	Land Clearing		Boat Storage					
POSITION HELD WITH ENTITY	President		President					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes		Yes					
NATURE OF MY OWNERSHIP INTEREST	President		President					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE								
SIGNATURE:	Than		DATE SIGN	ED: 2-17-	10			

FILING INSTRUCTIONS:

WHAT TO FILE:

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted.

WHEN TO FILE:

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, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

WHERE TO FILE:

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; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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

NOTE:

If you are leaving office or employment during the first half of 2010, you may not have filed Form 1 for 2009. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2009 by July 1 of 2010.