FORM 1 F

FINAL STATEMENT OF FINANCIAL INTERESTS

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(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)								
LAST NAME — FIRST NAME — MIDDLE NAME BLOOKS BRENDA MAILING ADDRESS: 2349 B COYKSCIEW RA ESTERD FL CITY: ZIP:	33928 county:	LOCAL OFFIC	OLLOWING (see "Who Must File" on page 3):					
BOTH PARTS OF THIS SECTION MUST BE COMPLETED DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2008 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS								
PART A PRIMARY SOURCES OF INCOME NAME OF SOURCE OF INCOME CLEW LAND & WATEL TRUST FIGURE	ME [Major sources of income SOURCE ADDRE	CE'S	DESCRIPTION OF THE SOURCES PRINCIPAL BUSINESS ACTIVITY BLOC. Di Ajund Drofessor					
	NCOME [Major customers, clie E OF MAJOR SOURCES BUSINESS' INCOME		PRINCIPAL BUSINESS ACTIVITY OF SOURCE					
PART C REAL PROPERTY [Land, building	gs owned by the reporting per	'son]	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet. OTHER FORMS you may need to file are described on page 6.					

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PART D — INTANGIBLE PEI	RSONAL PROPERTY [Sto	ocks, bonds	s, certificates of deposit, etc.] BUSINESS ENTITY TO WI	HICH THE F	PROPERTY RELATES	_
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PART E — LIABILITIES [Majo					,	140)
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WITCHESTS IN S	SUSIMEORE		h man of			
PART F — INTERESTS IN SF	PECIFIED BUSINESSES BUSINESS ENTITY #		ip or positions in certain types of BUSINESS ENTITY #:	`	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY	NIA	<u></u>	5001.1200		DUSINEOU LITTER, # 5	
ADDRESS OF BUSINESS ENTITY						
PRINCIPAL BUSINESS ACTIVITY						—
POSITION HELD WITH ENTITY						<del></del>
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS						
NATURE OF MY OWNERSHIP INTEREST	1					_
	TITOUGH E ARE CO	TIMILE	TON A SERABATE SHE	n c/	12 CHECK LIEBE	
IF ANT UN FARTOIR	THROUGH PARE CO	NINUE	D ON A SEPARATE SHE	ET, PLEA	ASE CHECK HERE	
SIGNATURE:			DATE S	SIGNED:	1/28/09	
	FILIN	G INS	STRUCTIONS:			
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***** TO EU C.	WHER	- TO EII	· <del>-</del>	··ote,		
WHAT TO FILE: After completing all parts of	of this form on Local		: file with the Supervisor of		ou are leaving office or employme	
pages 1 and 2, including signing send back only pages 1 and 2	of filing (you nently res	eside. (If yo	county in which you perma- ou do not permanently reside	during ti have file	the first half of 2008, you may n led Form 1 for 2007. In that cas	not se,
need not return any of the instr Facsimiles will not be accepted.	truction pages). in Florida	la, file with	the Supervisor of the county has its headquarters.)	this is no though ti	not the last form you will file, eve the Form 1F covers the final portion	en Ion
WHEN TO FILE:	State	te officers	or specified state employ-	of your t	term of office or employment. Your equired to file Form 1 for 2007 is	ou/
At the end of office or emplo local officer, state officer, and spi employee is required to file a final	oyment each Drawer 1 pecified state physical south, Su	15709, Tai address:	Commission on Ethics, P.O. allahassee, FL 32317-5709; 3800 Maclay Boulevard, allahassee, FL 32312.	July 1 of		10,
form (Form 1F) within 60 days office or employment, unless he canother position within the 60-day requires filing financial disclosure of the form of	s of leaving To de or she takes falls unde on page 3	determine v ler, see the	what category your position "Who Must File" Instructions			
rodence miligionalization are all a	711 O C.					,

Form 6.