FORM 1	STATEM	2005			
Please print or type your name, mailing address, agency name, and position bel LAST NAME FIRST NAME MIDD BUYARTE, MAILING ADDRESS 4931 Study CIDY: 4931 Study CIDY: MAME OF AGENCY : NAME OF AGENCY : NAME OF OFFICE OR POSITION HE CONSTRUCTION AND LE CHECK ONLY IF CANDIDATE	ZIP: COUNTY: FL Lee guisition of Stanardsla	FOR OUSE OF CUSAC- COUSAC- COUNTER	FFICE		
"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, 2005 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR OR ON A FISCAL YEAR. MANNER OF CALCULATING REPORTABLE INTERESTS: DECEMBER 31, 2005 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATIONS 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): COMPARATIVE (PERCENTAGE) THRESHOLDS QR DOLLAR VALUE THRESHOLDS OF INCOME (Major sources of income to the reporting person] NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S OF INCOME MADINESS DESCRIPTION OF THE SOURCE'S OF INCOME MADING Shady Yeart (h., Ft. Myes) Advertising MARKEY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE Source'S<					
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY	OF INCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	businesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PART C - REAL PROPERTY [Land, buildings owned by the reporting person] HOUSE, 4931 Shady River Law, Front Myers Office, 1920 Caliley Ave. Fort Myers Duplex, 3417-19 Via Torcida, Fort Myers Duplex, 5370 Pollmetto St, Port Myers Preach & adjacent the Pontune, 14 acres, 13451 Pence Rd., Port Myers Husture, 5 acres, Cook Lane, Alm CE FORM 1 - Eff. 1/2006 (Continued on reverse side) Variant Lot, Water new Boy D			OTHER FORMS you may need to file are described on page 6.		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
THE N/A					
			······································		
PART E — LIABILITIES [Major d NAME OF CRED		ADDRESS OF CREDITOR			
Mortcase	Surces	Surcont Cordet Ohnion			
Mortsperce	Edis	n Naturial Bork	· · · · · · · · · · · · · · · · · · ·		
		a ta'an amin' any amin' amin' a			
PART F — INTERESTS IN SPECIF	FIED BUSINESSES [Ownership or posi				
NAME OF	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
BUSINESS ENTITY 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): Sti Dedetto DATE SIGNED (required): 29/2004					
FILING INSTRUCTIONS:					
WHAT TO FILE: WHERE TO FILE: WHEN 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 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.