FORM 1	STATEMENT OF			2005		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS				
LAST NAME - FIRST NAME - MIDDLE NA DurgeSS I homa MAILING ADDRESS: S 100 Say brook		FOR OF USE OF		ode S		
NAME OF AGENCY: TO CHECK ONLY IF CANDIDATE OR	COUNTY: COUNTY	PPOINTEE		6AU3039W0340 SGE Lee eq. Code		
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: 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 OR DOLLAR VALUE THRESHOLDS						
PART A PRIMARY SOURCES OF INCOM NAME OF SOURCE	TE [Major sources of income to the SOU	ne reporting person] RCE'S	DE:	SCRIPTION OF THE SOURCE'S		
Sont ra Day Group	9990 Cocone	RESS 1+ 12 #200 1298 FL 34135	Rea	al Estate Dev.		
PART B SECONDARY SOURCES OF INCOME. NAME OF NAME O	COME [Major customers, clients, AME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	business	ses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PART C REAL PROPERTY [Land, building	ngs owned by the reporting perso	n]		IG INSTRUCTIONS for when here to file this form are locat-		
NA			ed at INST this for on pa	the bottom of page 2. RUCTIONS on who must file orm and how to fill it out begin		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
Own IRAd Sec 45	7. Str	uble Financial				
Call retirement acc	2+8)					
HOI(K) Man Donita Bay Group						
		ļ				
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	1	ADDRESS OF CR	EDITOR			
1st Mortgage on residence Wells Fargo Mortgage Co.						
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses] I BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3						
NAME OF BUSINESS ENTITY	55 ENTIT # 1	BOSINEOS ENTIT # 2	DOSINESS ENTITL# 3			
ADDRESS OF BUSINESS ENTITY	<u> </u>					
PRINCIPAL BUSINESS ()	H					
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): DATE SIGNED (required): \$\frac{1}{2}\left(06)\$						
FILING INSTRUCTIONS:						

WHAT 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.

WHERE TO FILE:

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.

WHEN TO FILE:

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.