FORM 1	STATEMI	ENT OF	2004		
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERESTS					
BUTT DECE		FOR OF USE ON			
14400 Cem	etery Rd	~			
Fort Myer	ee				
Lee County La	nd Plannikg	Ageney			
NAME OF AGENCY: Mender	σ		Conf. Code		
NAME OF OFFICE OR POSITION HEI	.D OR SOUGHT :		Req. Code		
CHECK ONLY IF CANDIDATE	OR DINEW EMPLOYEE OR AP	POINTEE			
	**BOTH PARTS OF THIS SECTION	ON MUST BE COMPLETED*	*		
			HER BASED ON A CALENDAR YEAR OR ON YEAR ENDING EITHER (check one):		
DECEMBER 31, 2004		TAX YEAR IF OTHER THAN 1	HE CALENDAR YEAR:		
THE LEGISLATURE ALLOWS FILER	S THE OPTION OF USING REPORT OR USING COMPARATIVE THRESH	OLDS, WHICH ARE USUAL	ARE ABSOLUTE DOLLAR VALUES, WHICH LY BASED ON PERCENTAGE VALUES (see		
		-	DOLLAR VALUE THRESHOLDS		
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE SOURCE'S OF INCOME ADDRESS		CE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
City of Fort mye	FFORT MYERS 2200 Sacond St, Fort m		iocal covernment		
			0		
			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		
		· · · · · · · · · · · · · · · · · · ·			
PART C REAL PROPERTY [Land, buildings owned by the reporting person] 14400 Cemetery Road FDI+ MURS 23905			FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2.		
14400 Cemetery Road toit myers 33905			INSTRUCTIONS on who must file		
			this form and how to fill it out begin on page 3.		
			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			ICH THE PROPERTY RELATES			
CDŚ	Metl	iFC				
Deferred Comp	nat	Konwide				
		· · · · · · · · · · · · · · · · · · ·				
		<u></u>				
		na a sa sin				
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	I	ADDRESS OF CREDITOR				
Sunceast Schools Fe	od Constit U	edit Union - 1533 Matthew Dr. Fort myen				
	chi cyclin -		ind prew wi, out riges			
			· · · · · · · · · · · · · · · · · · ·			
PART F INTERESTS IN SPECIFIED BUSIN						
NAME OF BUS	SINESS ENTITY # 1	BUSINESS ENTITY # 2	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 THROU		D ON A SEPARATE SHE	ET, PLEASE CHECK HERE			
SIGNATURE (required):						
- Milk	SBA		28 June 05			
FILING INSTRUCTIONS:						
WHAT TO FILE:	WHERE TO FIL	HERE TO FILE: WHEN TO FILE:				
After completing all parts of this form, includ signing and dating it, send back only the	ting If you were mailed first on Ethics or a Cou	f you were mailed the form by the Commission <i>Initially</i> , each local officer/employee, state officer, and specified state employee must				
sheet (pages 1 and 2) for filing.	for your annual disc	or your annual disclosure filing, return the form file <i>within 30 days</i> of the date of his or her				
	to that location.	loyees file with the Supervisor	appointment or of the beginning of employ- ment. Appointees who must be confirmed by			
		county in which they perma-	the Senate must file prior to confirmation, even			

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.

ections 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.

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.

FORM 1	STATEM	2004 2003/04				
Please print or type your name, mailing address, agency name, and position below	200 SUP					
LAST NAME - FIRST NAME - MIDDL BUT DEM MAILING ADDRESS : 14400 CEW	SUPERVISOR OF LL-C					
CITY: FORT MYERS NAME OF AGENCY: Lee County Lu NAME OF OFFICE OR POSITION HE LOCAL DEFNCES CHECK IF CANDIDATE OR	ID Code ID No. Conf. Code P. Req. Code PDF 2003					
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE OF INCOME ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
CITY OF IDIT I	Lity of fort Myers 2200 Second St.					
PART B SECONDARY SOURCES ON NAME OF BUSINESS ENTITY	DF INCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to I ADDRESS OF SOURCE	Dusinesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
PART C REAL PROPERTY [Land,	buildings owned by the reporting perso $P(Y Rd, 339p)$	n]	FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3. OTHER FORMS you may need to file are described on page 6.			

CE FORM 1 - Eff. 1/2004 (Continued on reverse side)

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PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE F					
TYPE OF INTANGIBLE					
- 10					
	(C)				
			·		
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR			
Home Loan	Suna	oast Schools Fed.	Credit Union		
		·	1, <u>27</u> , 21, 10, 21, 11, 12, 13, 14, 14, 14, 14, 14, 14, 14, 14, 14, 14		
		· · · ·			
	IESSES [Ownership or po SINESS ENTITY # 1	ositions in certain types of businesses]			
NAME OF BUSINESS ENTITY					
ADDRESS OF BUSINESS ENTITY	<u></u>		$F = \tilde{h}$		
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY			HS to		
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):				
EILING 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.

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.

FILING INSTRUCTIONS:

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.

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.