FORM 1	STATE	EMENT OF	W	2011		
Please print or type your name, mailing address, agency name, and position below	FINANCIA	AL INTERES	TS \			
LAST NAME FIRST NAME MIDDLE	NAME:	FC	OR OFFICE	· /		
CAMERATTA, NICHOLAS,	RAYMOND	US	SE ONLY:			
MAILING ADDRESS :				M		
4954 ROYAL GULF CIRC	LE		ı ID Co	ode to	$\frac{3}{2}$	
				Š	⊒ ਵ ਪ	
CITY:	ZIP: COUNTY	' ;	ID No		Ž.	
FORT MYERS 33966 LEE			I ID INC	·-	-	
NAME OF AGENCY:	· · · · · · · · · · · · · · · · · · ·	"-"	Conf	Codo	3	
CYPRESS SHADOWS CDD			Cont.	Code . U	3	
NAME OF OFFICE OR POSITION HELD OR SOUGHT :			P. Re	eq. Code		
Vice-Chair						
You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.				Č T	3	
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE	OR APPOINTEE		•		
**** BOTH	PARTS OF THIS SE	CTION MUST BE C	OMPLETE	ED ****		
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 (must check one):						
DECEMBER 31, 2011		CIFY TAX YEAR IF OTHER TH				
MANNER OF CALCULATING REPORTA	DI E INTERESTS:					
THE LEGISLATURE ALLOWS FILERS	THE OPTION OF USING RE	PORTING THRESHOLDS TH	AT ARE ABSO	DLUTE DOLLAR VALUES, WHICH	l,	
REQUIRES FEWER CALCULATIONS, C instructions for further details). PLEASE S	R USING COMPARATIVE TH	RESHOLDS. WHICH ARE US	UALLY BASED	ON PERCENTAGE VALUES (SEE	•	
			AR VALUE THE			
PART A PRIMARY SOURCES OF INC	rt, you must write "none" or "	'n/a")	ilian nenona p	~!		
NAME OF SOURCE		SOURCE'S		I DESCRIPTION OF THE SOURCE'S		
OF INCOME		ADDRESS		PRINCIPAL BUSINESS ACTIVITY		
CAMERATIA COMPANIES, LLC. 4954 ROYAL GULF CIRLCE,FT MYERS,FL		IRLCE,FT MYERS,FL 33966	3966 REAL ESTATE DEVELOPER			
						
PART B SECONDARY SOURCES OF	INCOME					
Major customers, clients, and	d other sources of income to but ort, you must write "none" or	sinesses owned by the reporting "n/a")	g person - See	Instructions p. 4]		
NAME OF I	NAME OF MAJOR SOURCES	ı ADDRESS	1	PRINCIPAL BUSINESS		
BUSINESS ENTITY	OF BUSINESS' INCOME	OF SOURCE	.	ACTIVITY OF SOURCE		
2x4 Realty, LLC	CS-High Point LLC			Real Estate Company	T	
Cameratta Construction				General Contractor	Н	
My Three Sons, LLC				Cattle Farmer	Ц	
RCS-Corkscrew Land, LLC		·		Developer		
Lakes of Corkscrew LLC	ildings owned by the reporting n	erson - See Instructions n. 41		Developer	_4	
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")				FILING INSTRUCTIONS for when and where to file this form		
				ated at the bottom of page 2.		
510 Acres Estero, FL (RCS-Corkscrew Land, LLC)				NIOTIONO .		
•			INSTRUCTIONS on who must			
				begin on page 3.		
				OTHER FORMS you may need		
	·		to file a	are described on page 6.		

PART D — INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. - See instructions p. 5] (if you have nothing to report, you must write "none" or "n/a") BUSINESS ENTITY TO WHICH THE PROPERTY RELATES TYPE OF INTANGIBLE 2x4 Realty, LLC; Cameratta Companies; Interests in Partnerships, Stocks, Bank Accts Cameratta Construction; RCS-Corkscrew Land; Lakes of Corkscrew; My Three Sons. PART E - LIABILITIES [Major debts - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a") NAME OF CREDITOR ADDRESS OF CREDITOR RCS-CS Florida 1450 Infinite Drive Suite E2, Louisville, CO 80027 NE Ohio P.O. Box 22447, Beachwood, OH 44122 Plaza 82 4954 Royal Gulf Circle, Fort Myers, FL 33966 First Place Bank 185 E. Market St., Warren, OH 44481 PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a") Business Entity #1 Business Entity #2 Business Entity #3 Business Entity #4 **Business Entity #5** Business Entity #6 My Three Sons, Cameratta RCS-Corkscrew Lakes of Cameratta 2x4 Realty, LLC NAME OF BUSINESS ENTITY lllc Companies, LLC Construction Land, LLC Corkscrew, LLC 4954 Royal Gulf ADDRESS OF BUSINESS ENTITY Circle Circle Circle Circle Circle Circle Fort Myers, FL 33966 Fort Myers, FL PRINCIPAL BUSINESS ACTIVITY 33966 33966 33966 33966 33966 Real Estate POSITION HELD WITH ENTITY Developer Cattle Rancher General Developer Asset Mgt/ Company Owner Contractor Owner Owner Owner Developer I OWN MORE THAN A 5% Yes - 100% Yes - 100% Yes - 100% Owner Owner Yes - 100% INTEREST IN THE BUSINESS Yes - 100% Yes - 100% 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):

06/21/2012

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.

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If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

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 filling, 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.

Facsimiles will not be accepted.

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. However, filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.



SUPERVISOR OF ELECTIONS P.O. BOX 2545 FORT MYERS FL 33902-2545

LE COUNTY
CONSTITUTIONAL COMPLEX
PO. BOX 2545
FORT MYERS, FLORIDA 33902

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