FORM 1	<u> </u>	STATEM	ENT OF		2003		
Please print or type your name, mailing address, agency name, and position below:  FINANCIAL INTERESTS							
LAST NAME FIRST NAME MIDE CARBONELL	DLE NAMI			FOR OFFICE USE ONLY:			
MAILING ADDRESS:							
P.O. Box 261	6¥		<del></del>		) Code		
CITY:	ZIP	: COUNTY:			A/C & B B		
FORT MYERS 33902 Lee \					No.		
NAME OF AGENCY: LEE COUNTY	С	A/C & A/C ONO.					
NAME OF OFFICE OR POSITION HELD OR SOUGHT:							
LONSTRUCTION	-	10					
CHECK IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE							
**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, 2003 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:							
MANNER OF CALCULATING 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 (se 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 INCOME [Major sources of income to the reporting person]							
NAME OF SOURCE OF INCOME		Major sources of income to the reporting personj SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
C + Sons Corp		PO BOX 2668 FT Myers:		33902 demolition			
		3258 FowlerSt		MORTGAGE REceivable			
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of NAME OF 1 NAME OF MAJOR SOURCES 1 ADDR			and other sources of i		esses owned by the reporting person]  PRINCIPAL BUSINESS		
BUSINESS ENTITY	1	BUSINESS' INCOME	OF SOU		ACTIVITY OF SOURCE		
0.0	, .	C	0.0.0	0 400			
C+SUNS CURP	Lee COUNTY		PU BUX 398 - 33902 PU Drawe( 2217 - 33902				
lı .		City of FT Myers PU Drawe Commercial Const Hamilton					
PART C REAL PROPERTY [Land, buildings owned by the reporting person] FILING INSTRUCTIONS for when							
1500 Seaboard Str Ft Myers FL					where to file this form are locat- it the bottom of page 2.		
2560 Moreno Ave. FT Myers FL (3parcels)					TRUCTIONS on who must file		
21530 Pearl St Alva FL FL					form and how to fill it out begin page 3.		
9460 CR 78 AIVA FL					HER FORMS you may need to are described on page 6.		
101 Normandy Dr. Tavernier FL							

CE FORM 1 - Eff. 1/2004 (Continued on reverse side)
LOTS 1, 2, BIK 26 BUCKINGHAM PARK

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]  TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
C+SON COR	LO STOCK C	+ SONS CORP					
CD	1	Ocean Bank, MIAMI					
PART E — LIABILITIES [Major	dobtel						
NAME OF CREI		ADDRESS OF CREDITOR					
none			**************************************				
		744-19	77 4				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2   BUSINESS ENTITY # 3					
NAME OF BUSINESS ENTITY	C+ SUNS CURP	Car Conter Inc					
ADDRESS OF BUSINESS ENTITY		PUBY 2668-33902					
PRINCIPAL BUSINESS ACTIVITY	demolition	sales of Equip					
POSITION HELD WITH ENTITY	President	President					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	yes	Ves	y and distribution of the second of the seco				
NATURE OF MY OWNERSHIP INTEREST	100% Stock	100% Stock					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required):  Tury L Carbonell  DATE SIGNED (required):  24-MAY04							
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.

## 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.

**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.