FORM 1	STATEM	2004			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS			
LAST NAME - FIRST NAME - MIDDLE N CARBONELL MAILING ADDRESS:	ME: Terry L	FOR OF	FICE SUPERING SEP		
PO BOX 2668	•	/	ID Code		
			2		
CITY: FORT MYEYS NAME OF AGENCY:	ee	ID No.			
Lee Coun		Conf. Code			
NAME OF OFFICE OR POSITION HELD C CONSTRUCTION LIC		P. Req. Code			
CONSTRUCTION LICENSING BOAVO CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE PDF 200					
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, 2004 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					
COMPARATIVE (PERCENTAGE) TI	HRESHOLDS 9	<u>or</u> Da i	DOLLAR VALUE THRESHOLDS		
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE	ME [Major sources of income to the	e reporting person]	DESCRIPTION OF THE SOURCE'S		
PART A PRIMARY SOURCES OF INCO	ME [Major sources of income to the SOUF	e reporting person]	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME	ME [Major sources of income to the SOUF ADDR	e reporting person] RCE'S RESS	DESCRIPTION OF THE SOURCE'S		
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME	ME [Major sources of income to the SOUR ADDR	e reporting person] RCE'S RESS F7 Myers 33902 33901	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY DEMOLITION		
PART A - PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME C + Sons Corp. Used Car Dept	PO Box 2668 3258 Fowler St -	e reporting person] RCE'S RESS F7 Myers 33902 33901	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY DEMOLITION MORTGAGE		
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME C+ Sons Corp. Used Car Dept Francisco Vela PART B SECONDARY SOURCES OF INCOME	ME [Major sources of income to the SOUF ADDR POBOX 2668 3258 FOWLER St -	e reporting person] RCE'S RESS F7 Myers 33902 33901 2 - Miani 33135	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY DEMOLITION MORTGAGE		
PART A - PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME C+ Sons Corp. Used Car Dept Yancisco Vela PART B - SECONDARY SOURCES OF IN NAME OF	ME [Major sources of income to the SOUF ADDR PO POX 2668 3258 FOWER St - 204 SW 20 Ave COME [Major customers, clients, a AME OF MAJOR SOURCES	e reporting person) RCE'S RESS F7 Myers 33902 33901 2 - M144i 33i35 and other sources of income to ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY DEMOLITION MORTGAGE MORTGAGE businesses owned by the reporting person) PRINCIPAL BUSINESS		
PART A - PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME C+ Sons Corp. Used Car Dept Yancisco Vela PART B - SECONDARY SOURCES OF IN NAME OF	ME [Major sources of income to the SOUF ADDR PO POX 2668 3258 FOWER St - 204 SW 20 Ave COME [Major customers, clients, a AME OF MAJOR SOURCES	e reporting person) RCE'S RESS F7 Myers 33902 33901 2 - M144i 33i35 and other sources of income to ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY DEMOLITION MORTGAGE MORTGAGE businesses owned by the reporting person) PRINCIPAL BUSINESS		
PART A - PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME C+ Sons Corp. Used Car Dept Yancisco Vela PART B - SECONDARY SOURCES OF IN NAME OF	ME [Major sources of income to the SOUF ADDR PO POX 2668 3258 FOWER St - 204 SW 20 Ave COME [Major customers, clients, a AME OF MAJOR SOURCES	e reporting person) RCE'S RESS F7 Myers 33902 33901 2 - M144i 33i35 and other sources of income to ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY DEMOLITION MORTGAGE MORTGAGE businesses owned by the reporting person) PRINCIPAL BUSINESS		
PART A - PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME C+ Sons Corp. Used Car Dept Francisco Vela PART B - SECONDARY SOURCES OF IN NAME OF BUSINESS ENTITY PART C - REAL PROPERTY [Land, build 2560 MORENO AVE FOR	ME [Major sources of income to the SOUF ADDR PUBLIC STATE OF BUSINESS' INCOME ME [Major customers, clients, a AME OF MAJOR SOURCES OF BUSINESS' INCOME MYECS FL 3350/	e reporting person] RCE'S RESS F7 Myers 33902 33901 2 - MIGH 33135 and other sources of income to ADDRESS OF SOURCE	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY DEMOLITION MORTGAGE MORTGAGE businesses owned by the reporting person) PRINCIPAL BUSINESS		
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME C+ SONS CORP. Used Car Dept Yancisco Vela PART B SECONDARY SOURCES OF IN NAME OF BUSINESS ENTITY PART C REAL PROPERTY [Land, build 2560 MORENO AVE FOR	ME [Major sources of income to the SOUF ADDR PUBLIC ST. 3258 FOWER ST. 33916	e reporting person] RCE'S RESS F7 Myers 33902 33901 2 - M144i 33135 and other sources of income to ADDRESS OF SOURCE	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY DEMOLITOR MORTGAGE MORTGAGE DUSINESSES OWNED BY THE REPORTING PERSON] PRINCIPAL BUSINESS ACTIVITY OF SOURCE FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. INSTRUCTIONS on who must file		
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME C+ Sons Corp. Used Car Dept Francisco Veia PART B SECONDARY SOURCES OF IN NAME OF BUSINESS ENTITY PART C-REAL PROPERTY [Land, build 2560 MORENO AVE FOR 1500 SEABOARD ST, FT.	ME [Major sources of income to the SOUF ADDR PUBLIC ST. 3258 FOWER ST. 33916	e reporting person] RCE'S RESS F7 Myers 33902 33901 2 - M144i 33135 and other sources of income to ADDRESS OF SOURCE	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY DEMOLITION MORTGAGE MORTGAGE DUSINESSES OWNED BY THE REPORTING PERSON] PRINCIPAL BUSINESS ACTIVITY OF SOURCE FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		

PART D — INTANGIBLE PERS TYPE OF INTANG		ks, bonds, certific	cates of deposit, etc.) BUSINESS ENTITY TO WHIC	H THE PROPERTY RELATES		
STOCKS			C+SONS CURP			
STUCKS - VARIOU	STOCKS - VARIOUS		BK OF AMERICA, MICROSUFT, TIBB, ASO, HD, LOW.			
CD		OCEAU	<u>.</u>			
·						
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
Nove						
PART F - INTERESTS IN SPEC	IFIED BUSINESSES [O	wnership or positi	ons in certain types of businesses)			
	BUSINESS ENT	ITY#1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	C + Sons Co	ORP				
ADDRESS OF BUSINESS ENTITY	POBUX 2668 - 33902					
PRINCIPAL BUSINESS ACTIVITY	demolition					
POSITION HELD WITH ENTITY	president					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100%					
NATURE OF MY OWNERSHIP INTEREST	OWNER - Fee	·				
IF ANY OF PARTS	A THROUGH F ARI	CONTINUE	D ON A SEPARATE SHEE	T, PLEASE CHECK HERE		
SIGNATURE (required):	erry L Carl	bonell	DATE SIG	NED (required): 9/27/05		
	(FI		STRUCTIONS:			
WHAT TO FILE:	W	HERE TO FIL	.E:	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 filling.

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.

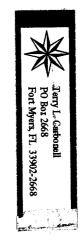
To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

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.









Lee County-Supervisor of Elections 2480 Thompson St Fort Myers FL 33901

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FORM 1		STATEMENT OF			2004
Please print or type your name, mailing address, agency name, and position below	FINANCIAL INTERE				
LAST NAME FIRST NAME MIDD CARBONELL MAILING ADDRESS: PO BOX 2668		ery L	FOR OF USE ON	3 4	1
CITY: FORT MYEYS NAME OF AGENCY: CONST. LIC BUT NAME OF OFFICE OR POSITION HE MEMORE CHECK ONLY IF CANDIDATE	ZIP: 339 AVD ELD OR S	102 Lee		MOSER SUPER ELECTA	5 2005 VISOR 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, 2004 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 NAME OF SOURCE	NCOME	SOU	RCE'S		SCRIPTION OF THE SOURCE'S
OF INCOME	_	0	ress 1 Myers 33902	dou	RINCIPAL BUSINESS ACTIVITY
Used Car Dept					mercial Mortage.
Tere Ranch		PU BUX 2668 FORT Myers 33902			He ranch
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY	NAM	ME [Major customers, clients, E OF MAJOR SOURCES F BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	business	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE
CHE ONS CORP	Cit	ry of Ft Myers	PU BOX 2217 -33	3902	City, goit
CEE SONS CURP	Lee	i Co	PO BOX 398 - 339	302	county govit
PART C-REAL PROPERTY [Land, 2560 MORENO AVE, 21530 Pearl St. AIVA 1500 Seabourd St. For	FORT	Myees	n NE Str. P.I. CapeCora	and w ed at INST	INSTRUCTIONS for when where to file this form are locational the bottom of page 2. RUCTIONS on who must file form and how to fill it out begin as 3.
10B1 & 2. BIK 26 BUCKINGHAM PARK				отн	ER FORMS you may need to

PART D — INTANGIBLE PERSO TYPE OF INTANG	ONAL PROPERTY [Stock	ks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
STOCKS Bank or		x Augrica Brokeruse			
bank accounts			AMERICA		
bank account	1		-		
bank account		TIB Bank			
banic account			a Gulf Baux		
PART E — LIABILITIES [Major debts] NAME OF CREDITOR			ADDRESS OF CREDITOR		
none					
PART F — INTERESTS IN SPECI	IFIED BUSINESSES [Ow	nership or positi	ons in certain types of businesses]		
BUSINESS ENTITY # 1			BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY	C+SONS CORP		CAR Center INC		
ADDRESS OF BUSINESS ENTITY	PU BUY 2668 - 33902		PUBOX 2668 - 33902		
PRINCIPAL BUSINESS ACTIVITY	demolition		equip/truck sales		
POSITION HELD WITH ENTITY	pres		pres		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	ves		ves		
NATURE OF MY OWNERSHIP INTEREST	100%		100% Joint w/Hushaud		
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE (required): Linu L Carbinall 5-23-05				equired): 5 - 2 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0	
σ FILING INSTRUCTIONS:					

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