FORM 1X AMENDMENT TO FORM 1					
STATEMENT OF FINANCIAL INTERESTS					
CHURCH D:	LE NAME (same as on original Form 1): ENAME (same as on original Form 1):	Interests) I FILED FOR THE YEA DURING HARMEAR, I HEL POSITION OF: MEMI	⊖ LD, OR WAS A CANDIDATE FOR, THE		
CITY: ZIP:	COUNTY:	PAHHING SO	· · · · · · · · · · · · · · · · · · ·		
MANNER OF CALCULATING REPORTABLE INTERESTS: PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VALUES. BEGINNING IN 2001, THE LEGISLATURE ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must_bheck one): COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS					
	INCOME [Major sources of income to the eport, write "none" or "n/a") SOURCE ADDRI CTZTI IZ BUH SP	CE'S DI	ESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY PEN ESTATE ADVISORY OHSULTING		
	and other sources of income to business eport, write "none" or "n/a") NAME OF MAJOR SOURCES OF BUSINESS'S INCOME	ADDRESS OF SOURCE	See instructions] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PART C – REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")					
PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, write "none" or "n/a") TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES WHICH THE PROPERTY RELATES					

PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" o	or "n/a")			
NAME OF CREDITOR	ADDRESS OF CREDITOR			
NONF				
,,				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, write "none" or "n/a"				
NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2		
ADDRESS OF BUSINESS ENTITY	N/a			
PRINCIPAL BUSINESS ACTIVITY	11/2			
POSITION HELD WITH ENTITY				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS				
NATURE OF MY OWNERSHIP INTEREST				
PART G-EXPLANATION OF CHANGES CHANGE OF PRIMARY INCOME SOURCE				
- UPDATED S	SECOHDARY 1 HC	OME/CLIENT		
		LIST		
IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE				
SIGNATURE	DAT	E SIGNED:		
	My 4	-29-15		
If a certified public accountant licensed under Chapter or she must complete the following statement:	473, or attorney in good standing with the	e Florida Bar prepared this form for you, he		
I,and the instructions to the form. Upon my reasonable	, prepared the CE Form 1X in accordate knowledge and belief, the disclosure here	ance with Section 112.3145, Florida Statutes, in is true and correct.		
Signature		Date		

WHERE TO FILE:

Return the form to the location where you filed the Form 1 that you are seeking to amend.

Local officers should have filed with the Supervisor of Elections of the county in which they permanently resided. (If you did not permanently reside in Florida, then with the Supervisor of the county where your agency had its headquarters.)

FILING INSTRUCTIONS:

State officers' or specified state employees' forms should be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

Candidates should have filed their Form 1 together with their qualifying papers.

QUESTIONS:

About this form or the ethics laws may be addressed to the Commission on Ethics, Post Office Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303; telephone (850) 488-7864.

INSTRUCTIONS FOR COMPLETING FORM 1X:

INTRODUCTORY INFORMATION (At Top of Form):

NAME, DISCLOSURE PERIOD, NAME OF POSITION, and NAME OF AGENCY: Use the same information as on the original Form 1 you are seeking to amend.

MAILING ADDRESS: Use your current mailing address.

MANNER OF CALCULATING REPORTABLE INTERESTS: Check the box that corresponds to the type of thresholds you used for the original Form 1 you are seeking to amend.

PARTS A through F:

Use these sections of the form to report the new information you believe should have been reported on your original Form 1, continuing on a separate sheet if necessary. Additional instructions are found on pages 3-5, attached.

PART G:

Use this section of the form to explain the changes you are making in your original Form 1.

Part B - Statement of Financial Interests for Form 1X updated 04 28 15 Community Development Advisors, LLC Client List updated 4/28/15

Dennis Church

Client	Address	Principle Business Activity
RWA Consulting	6610 Willow Park Drive Suite 200 Naples, FL 34109	Civil Engineering/Planning
Minto Communities	3606 Enterprise Ave Suite 208 Naples, Fl 34104 United States of America	Land development/homebuilding Company
Lipman Produce	315 E. New Market Road Immokalee, FL 34142	Agribusiness S
Apogee Realty Advisors, Inc.	6821 Wellington Drive Naples, Fl 34109	Real Estate Investment and Consulting
Seminole Gates, LLC	25799 Riverview Court Suite 205 Bonita springs, FL 34134	General Contractor
Oakbrooke Properties, Inc.	24880 Burnt Pine Drive #8 Bonita Springs, FL 34134	Land Development/Investment
LB Mediterra, LLC	15836 Savona way naples, fl 34110	Homebuilding
Labelle landings, LLC	225 W. Capitol Suite 3300 Little Rock, AR 72201	Landowner
Corbelis Management, LLC	Riverside Center 275 Grove Street, Suite 3-103 Newton, MA 02466	Real Estate Investment





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