FORM 1 F

FINAL STATEMENT OF FINANCIAL INTERESTS

2008

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

LAST NAME — FIRST NAME — MIDDLE NAM		NAME OF REPORTING PE	ERSON'S AGENCY: OCAL PLANNING AGENTS	
MAILING ADDRESS: 1896/ KNOLL LAND	we de	CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):		
SAN PARLOS PARK 33809	LEE	SPECIFIED ST	TATE EMPLOYEE	
CITY: ZIP:	COUNTY:	LIST OFFICE OR POSITIO		
DISCLOSURE PERIOD:	INTERESTS FOR THE PERK IVE, WHICH DATE WAS BLE INTERESTS: TION OF USING REPORTING RATIVE THRESHOLDS, WHICE THER THIS STATEMENT REF	THRESHOLDS THAT ARE A SICH ARE USUALLY BASET ON FLECTS EITHER (check offe): OR DOLL	008 AND THE DAST DATE I HELD THE PUBLIC, 2005. (Date must be prior to 12/31/08) SOLUTE BOLLAR VALUES WHICH REQUIRES IN PERFENTAGE VALUES (Lie multirusions for	
NAME OF SOURCE OF INCOME	SOURCE ADDRE	CE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
IRA	HOLLOW KEG		RETIREMENT FUNDS	
OHIO STATE TEMPOR RETIREM	STRES, COL	UMBUS, OH	PENSION	
MISSOUCT STATE RETIREMENT	_	FFERSON CITY	PENSION	
Social Security	WASHINGTON,	26	KETIRAMENT FUNDS	
	<u> </u>		L	
	NCOME [Major customers, cli E OF MAJOR SOURCES F BUSINESS' INCOME	lients, and other sources of inco ADDRESS OF SOURCE	ome to businesses owned by reporting person) PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
	A 118			
	HONE			
PART C REAL PROPERTY [Land, building		rson]	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.	
	NOVE		INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet. OTHER FORMS you may need to file are described on page 6.	

PART D — INTANGIBLE PE TYPE OF INTAN		ERTY [Stocks, bonds,	certificates of deposit, etc.) BUSINESS ENTITY TO WI	HICH THE PROPERTY RELATES				
	NO	y E						
	No							
					~			
					9JP			
PART E — LIABILITIES [Maj NAME OF CRED			ADDRESS	OF CREDITOR	26m0245 SOE			
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		ON E	 		<u> </u>			
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PART F — INTERESTS IN SI	PECIFIED BUSIN	NESSES [Ownership	o or positions in certain types of	businesses]				
NAME OF	BUSINESS	S ENTITY # 1	BUSINESS ENTITY #	2 BUSINESS ENTITY #	3			
BUSINESS ENTITY ADDRESS OF		~~··············						
BUSINESS ENTITY PRINCIPAL BUSINESS					·			
ACTIVITY		NONE						
POSITION HELD WITH ENTITY		No						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS					·····			
NATURE OF MY OWNERSHIP INTEREST								
IF ANY OF PARTS A	THROUGH F	ARE CONTINUE	D ON A SEPARATE SHE	ET, PLEASE CHECK HERE				
SIGNATURE: DATE SIGNED: 1-23-09								
	T		TDUCTIONS.					
FILING INSTRUCTIONS:								
pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filling (you need not return any of the instruction pages). Elections of the co nently reside. (If you in Florida, file with t		E: file with the Supervisor of county in which you permature do not permanently reside the Supervisor of the county has its headquarters.)	NOTE: If you are leaving office or employment during the first half of 2008, you may not have filed Form 1 for 2007. In that case, this is not the last form you will file, even though the Form 1F covers the final portion					
WHEN TO FILE: At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure	ecified state al disclosure			of your term of office or employmer will be required to file Form 1 for 2 July 1 of 2008.				
form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or		To determine what category your position falls under, see the "Who Must File" Instructions on page 3.						

Form 6.