CORM 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 NAME — CONTROL S Phyllogen State MAILING ADDRESS: 1000 For Control State Corpe Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 1000 For Control State City: 10	15 E Q \$\f\\407 33909 \COUNTY:	OCAL OFFIC	LLOWING (see "Who Must File" on page 3):				
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2008 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS							
PART A PRIMARY SOURCES OF INCOME [Major sources of income NAME OF SOURCE OF INCOME ADDRESSOURCE ADDRESSOUR		CE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
	NCOME [Major customers, cli IE OF MAJOR SOURCES F BUSINESS' INCOME	lents, and other sources of inc ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE				
PART C REAL PROPERTY (Land, building		rspn] #404	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. 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.				

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PART D — INTANGIBLE PEI TYPE OF INTAN		ERTY [Stocks, bonds	, certificates of deposit, etc.] BUSINESS ENTITY TO WI	HICH THE PROPERTY RELATES	
	<u>,</u>				
					36
			· -		3
					7
PART E — LIABILITIES [Majo			ADDRESS	OF CREDITOR	D3 SDE Lee Co F1
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PART F INTERESTS IN SE	PECIFIED BUSI	NESSES [Ownershi	p or positions in certain types of	businesses]	
	BUSINES	S ENTITY # 1	BUSINESS ENTITY #	2 BUSINESS ENTITY	Y#3
NAME OF BUSINESS ENTITY					
ADDRESS OF BUSINESS ENTITY					
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY					
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: Sulli	. D. C	ollija	DATE S	1-28-09	}

•]	FILING INS	STRUCTIONS:		
		WHERE TO FIL	LE: : file with the Supervisor of	NOTE: If you are leaving office or en	nployment
pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Elections nently res in Florida,		nently reside. (If yo in Florida, file with	ections of the county in which you perma- intly reside. (If you do not permanently reside Florida, file with the Supervisor of the county		u may not that case, I file, even
Facsimiles will not be accepted		• • •	has its headquarters.)	though the Form 1F covers the fir of your term of office or employr	
WHEN TO FILE: At the end of office or employment each local officer, state officer, and specified state		ess: 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.			
employee is required to file a fina form (Form 1F) within 60 days	of leaving		what category your position		
office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or		falls under, see the "Who Must File" Instructions on page 3.			

Form 6.