FORM 1	STATEME	NT OF		2011			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL I	NTERESTS					
LAST NAME - FIRST NAME - MIDDLE	NAME:	FOR OF	-				
COYNATSEY JOYCE MAILING ADDRESS!	Lyn	USE ON	LY:				
7996 Barrancas	Ave		<u> </u>				
Bokeelra F	-L 33922 Le	e		<i>,</i>			
CITY:		ID No	. පැ				
NAME OF AGENCY BOC		Conf.	127AY31PN 3 45 SOE LEE CO				
NAME OF OFFICE OR POSITION HELD	OR SOUGHT:		P. Re	q. Code Cf			
	You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.						
CHECK ONLY IF CANDIDATE OF	R NEW EMPLOYEE OR APPO	DINTEE					
**** 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 (must check one). DECEMBER 31, 2011 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 (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one): COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS							
PART A PRIMARY SOURCES OF INCO							
NAME OF SOURCE OF INCOME	NAME OF SOURCE SOURCE'S			CRIPTION OF THE SOURCE'S INCIPAL BUSINESS ACTIVITY			
lee County BOCC	PO Box 398 FT 1	Myers, Fl 3390		Waars			
	INCOME other sources of income to businesses of t, you must write "none" or "n/e")	owned by the reporting pers	ion - See	instructions p. 4]			
NAME OF BUSINESS ENTITY	11.11.2.5.11.2.5.11.2.5		1	PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
NA		· · · · · · · · · · · · · · · · · · ·					
				_			
PART C - REAL PROPERTY (Land, build (If you have nothing to report,	ee instructions p. 4]	when a	G INSTRUCTIONS for nd where to file this form ated at the bottom of page 2.				
Personal Residen		file this	RUCTIONS on who must is form and how to fill it out on page 3.				
				R FORMS you may need ire described on page 6.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
N/A							
		<u> </u>					
<u></u>							
PART E — LIABILITIES [Major debts - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF CREDITOR		ADDRESS OF CREDITOR					
N/A							
-+ <i>\f</i>							
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5]							
(If you have nothing to report, you must write "none" or "n/a")							
	BUSINESS	ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY	N /A						
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 CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required): DATE SIGNED (required):							
Jayoe Cona	ton		5-30-12				
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.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

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; 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.

Facsimiles will not be accepted.

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. However, filling a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.