FORM 1	STATEM	STATEMENT OF		2012		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	3	FOR OFFICE USE ONLY:		
LAST NAME - FIRST NAME - MIDDLE CONNOY Keith	Allen			111		
9302 Chestnut Tr	ree Loop					
Fort Myers 3	3967 Le	e e		134		
	OCC ITS			TO SECOND		
Server Operation,		·	`	13JUNE8PM0352 S0E LEE OOF		
You are not limited to the space on the lines CHECK ONLY IF CANDIDATE C	on this form. Attach additional sheets. OR NEW EMPLOYEE OR A			9F1		
**** 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, 2012 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, (see instructions for further details). CH	OR USING COMPARATIVE THRE ECK THE ONE YOU ARE USING:	ESHOLDS, WHICH ARE USU ::	IALLY BA	SED ON PERCENTAGE VALUES		
COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a")						
NAME OF SOURCE OF INCOME	soul	SOURCE'S ADDRESS		SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY		
Atus		2000 Main St. Ste 800 Fort Myers FL3990 IT Outsourci		Outsourcing		
			 			
(If you have nothing to repo	other sources of income to business	ses owned by the reporting per ADDRESS OF SOURCE	son - See	PRINCIPAL BUSINESS		
	OF BUSINESS INCOME	OF SOURCE		ACTIVITY OF SOURCE		
None						
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a") Non &				G INSTRUCTIONS for and where to file this are located at the bottom ge 2.		
			file th	RUCTIONS on who must is form and how to fill it egin on page 3.		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, you must write "none" or "n/a")						
TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
None						
		713.				
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, you must write "none" or "n/a")						
NAME OF CREDITOR		ADDRESS OF CREDITOR				
None			2 00			
			1			
			223			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (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	None					
ADDRESS OF BUSINESS ENTITY						
PRINCIPAL BUSINESS ACTIVITY						
POSITION HELD WITH ENTITY						
OWN MORE THAN A 5% INTEREST IN THE BUSINESS						
NATURE OF MY OWNERSHIP INTEREST	<u></u>					
IF ANY OF PARTS A THE	ROUGH F ARE CONTINU	ED ON A SEPARATE SHEET, PLE	ASE CHECK HERE			
SIGNATURE (required): DATE SIGNED (required):						
Kith Con	vor	6/28/13				
FILING INSTRUCTIONS:						
WHAT TO FILE:	WHERE TO	WHERE TO FILE: 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 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.

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.

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.

Initially, each local officer/employe state officer, and specified state employemust file within 30 days of the date his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior confirmation, even if that is less than a 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, star officers, and specified state employees are required to file by July 1st following each calendar year in which they hold the 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, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the firm of filing a CE Form 1 if he or she was in their position on December 31, 2012.