FORM 1	STATEM	STATEMENT OF		2012
Please print or type your name, mailing address, agency name, and position below:	FINANCIAI	L INTERESTS		FOR OFFICE USE OMLY:
LAST NAME FIRST NAME MIDDLE N	= .		_	<u> </u>
MAILING ADDRESS:	1			/
9962 VANILLALEA	c 97.			JULOSAMO941 SOE LEE OOF
	\u00e4			1 4
FORT MYERS 33	ZIP: COUNTY:		4	<b>/</b>
			/	, <del>M</del>
NAME OF AGENCY:	. LIC. BD.	\	/	<u> </u>
NAME OF OFFICE OR POSITION HELD O	<del>_</del>			
MEMBER				
You are not limited to the space on the lines of		•	1	
CHECK ONLY IF  CANDIDATE OF				
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FII YEAR OR ON A FISCAL YEAR. PLEASE EITHER (must check one): DECEMBER 31, 2012  MANNER OF CALCULATING REPORTA THE LEGISLATURE ALLOWS FILERS TH REQUIRES FEWER CALCULATIONS, OI (see instructions for further details). CHEI	NANCIAL INTERESTS FOR THE STATE BELOW WHETHER THE STATE BELOW WHETHER THE SPECIFY ABLE INTERESTS:  HE OPTION OF USING REPORTION OF USING COMPARATIVE THRESTS:  ICK THE ONE YOU ARE USING:	HIS STATEMENT IS FOR THE PR TAX YEAR IF OTHER THAN TH TING THRESHOLDS THAT ARE ESHOLDS, WHICH ARE USUALL ESHOLDS	ETHER RECEL HE CAL ABSOLLY BAS	BASED ON A CALENDAR DING TAX YEAR ENDING  LENDAR YEAR: LUTE DOLLAR VALUES, WHICH
PART A PRIMARY SOURCES OF INCO	ME [Major sources of income to the	he reporting person - See instructio		TRESTICES
(If you have nothing to report,	, you must write "none" or "n/a")	)	,,, <sub>0</sub>	
NAME OF SOURCE OF INCOME		RCE'S PRESS		CRIPTION OF THE SOURCE'S INCIPAL BUSINESS ACTIVITY
7551				
( ). / )				
				***
PART B — SECONDARY SOURCES OF II [Major customers, clients, and o (If you have nothing to report,	other sources of income to business	ses owned by the reporting person	ı - S <del>e</del> e	instructions]
NAME OF N BUSINESS ENTITY	IAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE
	- <del>/ / / / / /</del>			
	<u> </u>			
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")			FILING INSTRUCTIONS for when and where to file this form are located at the bottom	
9962 VANILLALEAS	<u> </u>		orm a of pag	
FORT MYERS, FC		fi	ile thi	UCTIONS on who must s form and how to fill it gin on page 3.

	<del>*                                    </del>					
PART D — INTANGIBLE PERSONAL PROPERTY (If you have nothing to report, you m	'[Stocks, bonds, certificates of deposit, etc See instructions] ust write "none" or "n/a")					
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PRO	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
CD	PERSONAL	PERSONAL E				
•						
<u>.                                    </u>		III)				
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 CREDITO	æ 0 = 1305 2‡				
/ / 0 .	· · · · · · · · · · · · · · · · · · ·					
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						
ADDRESS OF BUSINESS ENTITY						
PRINCIPAL BUSINESS ACTIVITY	/ W/H					
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, PLEAS	E CHECK HERE				
SIGNATURE (required):  DATE SIGNED (required):						
a.B. Cook 6/26/2013						
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.

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:

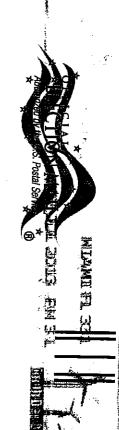
Initially. each local officer/employe state officer, and specified state employ must file within 30 days of the date his or her appointment or of the beginni of employment. Appointees who must confirmed by the Senate must file prior confirmation, even if that is less than days from the date of their appointme

Candidates for publicly-elected local offi must file at the same time they file th qualifying papers.

Thereafter, local officers/employees, sta officers, and specified state employe are required to file by July 1st followi each calendar year in which they hold th positions.

Finally, at the end of office or employme each local officer/employee, state officer, a specified state employee is required to file final disclosure form (Form 1F) within 60 dates of leaving office or employment. However filing a CE Form 1F (Final Statement Financial Interests) does not relieve the fi of filing a CE Form 1 if he or she was in th position on December 31, 2012.

A.B. COOK ERGY VANILLALEAF ST. FORT WYERS, FC 33919



SUPERVISOR OF ELECTIONS PO BOX 2545 FORT MYERS FL 33902-2545

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