FORM 1	STATEME	NT OF				
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL I	NTERESTS				
LAST NAME - FIRST NAME - MIDDLE N		FOR OFFICE USE ONLY:				
MAILING ADDRESS: 743/ Sika Deck War	1	SNOIT	TEE CONVIN BOOSE			
Foret Myres	33966 LCC ZIP: COUNTY:	1/07/	TEEE CONVINCE SHOOTE			
PUPILS Shadows Comme	ZIP: COUNTY:	## ## T## T##	ID No.			
NAME OF AGENCY: BOARD & SUPERVISOR NAME OF OFFICE OR POSITION HELD			THE PROPERTY OF THE PROPERTY O			
NAME OF OFFICE OR POSITION HELD	OR SOUGHT :		P. Red. Sect.			
CHECK ONLY IF CANDIDATE OF	NEW EMPLOYEE OR APPO	OINTEE	PDF 2005			
	**BOTH PARTS OF THIS SECTION	N MUST BE CO	ROUM PY-ECHCINGNS			
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FIN A FISCAL YEAR. PLEASE STATE BELOV			R ENDING EITHER (check one):			
DECEMBER 31, 2005 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: 2007						
MANNER OF CALCULATING REPORTAR THE LEGISLATURE ALLOWS FILERS T REQUIRES FEWER CALCULATIONS, O	HE OPTION OF USING REPORTING USING COMPARATIVE THRESHO	LDS, WHICH ARE USUALLY B	ASED ON PERCENTAGE VALUES (see			
instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):  COMPARATIVE (PERCENTAGE) THRESHOLDS  OR  DOLLAR VALUE THRESHOLDS						
PART A PRIMARY SOURCES OF INCO	SOURC	E'S	DESCRIPTION OF THE SOURCE'S			
JUC DEVELOPMENT CO., INC.	4310 Metro Fackway So	<del></del>	LUND BUSINESS ACTIVITY			
	Myens, FZ 33416					
PART B SECONDARY SOURCES OF I	NCOME [Major customers, clients, and	d other sources of income to bus	inesses owned by the reporting person]			
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
	<del></del>	<del></del>	I INC INCTRUCTIONS			
PART C REAL PROPERTY [Land, buildings owned by the reporting person]  FILING INSTRUCTIONS for whe and where to file this form are located at the bottom of page 2.						
112. 20 . 0.012 00119 , 1	and regard, the south	11	NSTRUCTIONS on who must file is form and how to fill it out begin n page 3.			
		0	THER FORMS you may need to			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]  TYPE OF INTANGIBLE  BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
Bank Accounts		FIPTH TO	hro Bmk			
401K Account						
WOIK Account		Merrill Lynch ABA Retwenat Finds				
PART E — LIABILITIES [Major de NAME OF CREDI			ADDRESS OF CR	EDITOR		
Countyunot Mortgoge Simi Vally, CA						
7			0			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
NAME OF	BUSINESS ENTITY	'#1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY						
ADDRESS OF BUSINESS ENTITY						
PRINCIPAL BUSINESS ACTIVITY						
POSITION HELD WITH ENTITY	·	l				
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): 12-14-2007				
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).

Facsimiles will not be accepted.

### 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.

# 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.