FORM 1		STATEM	MENT OF			2007	
Please print or type your name, mailing address, agency name, and position be		FINANCIAL	L INTERES	TS			
LAST NAME FIRST NAME MID Davis Kristopher M	DLE NAME	E: '		OR OFFICE SE ONLY:			<u>بر</u>
MAILING ADDRESS : 21645 Windham Run				<u></u>			OBDEC178NOS29
				"	D Code		T/AMO
CITY: Estero	ZIP : 3392			l)	D No.		305626
NAME OF AGENCY :				0	Conf. Code		
NAME OF OFFICE OR POSITION F Stoneybrook Community Dev					P. Req. Code		[40] 88]
You are not limited to the space on the CHECK ONLY IF CANDIDATE		is form. Attach additional sheets NEW EMPLOYEE OR A				PDF 2007	
DISCLOSURE PERIOD:	**E	BOTH PARTS OF THIS SECT	TION MUST BE COMPLET	TED**			
THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BI	ELOW WHE	ETHER THIS STATEMENT IS	FOR THE PRECEDING 1	TAX YEAR E	ENDING EITHER (d	NDAR YEAR OR ON check one):	4
MANNER OF CALCULATING REPO THE LEGISLATURE ALLOWS FILE	RTABLE IN	NTERESTS: DPTION OF USING REPOR	TAX YEAR IF OTHER TH	IAT ARE AI	BSOLUTE DOLLA	R VALUES, WHICH	н
REQUIRES FEWER CALCULATION: instructions for further details). PLEA COMPARATIVE (PERCENTAGE)	S, OR USI SE STATE	ING COMPARATIVE THRESH BELOW WHETHER THIS STA	HOLDS, WHICH ARE US TATEMENT REFLECTS EIT	SUALLY BAS THER (chec	SED ON PERCENT	TAGE VALUES (see	e
PART A - PRIMARY SOURCES OF NAME OF SOURCE	INCOME	sou	IRCE'S		DESCRIPTION OF	· · · - ·	
OF INCOME Blue Digital Resource, Inc.		ADD 10981 Harmony Park	DRESS Drive #4, Bonita Spri		PRINCIPAL BUSIN	VESS ACTIVITY	
Lit & More, Inc.			Fort Myers, Florida 33		aging		
		-					-
PART B - SECONDARY SOURCES	OF INCO	ME [Major customers, clients,	and other sources of incor	me to busin	esses owned by the	e reporting person]	
NAME OF BUSINESS ENTITY	NAME	IE OF MAJOR SOURCES ADDR F BUSINESS' INCOME OF SO			PRINC	IPAL BUSINESS ITY OF SOURCE	
						·	
	 			<u>. </u>			
	 					<u></u> .	
PART C REAL PROPERTY [Land	, buildings	owned by the reporting persor	n]			CTIONS for whe	
21645 Windham Run, Estero,	Florida 3	33928		and		is form are locat-	
				this		on who must file o fill it out begin	
						you may need to	i
			-	file	are described or	n page 6.	

	GIBLE		BUSINESS ENTITY TO WHICH THE	PROPERTY RELATES		
N/A						
			100-100			
C11.001111C11						
PART E — LIABILITIES [Majo		<u></u>		***		
NAME OF CREDITOR		ADDRESS OF CREDITOR				
Countrywide		4500 Park Granada, Calabasas, CA 91302				
Suntrust		P.O. Box 791274, Baltimore, MD 21279-1274				
Blue Digital Resource Inc.		10981 Harmony Park Drive #4, Bonita Springs, Florida 34135				
]				
			- "			
PART F — INTERESTS IN SPE	CIFIED BUSINESSES [O	wnership or positi	ons in certain types of businesses]			
	BUSINESS ENTITY # 1		BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	Blue Digital Resource Inc.		Blue Digital Reprographics Inc.	Blue Lit & More, Inc.		
	10981 Harmony Park Drive #4		10981 Harmony Park Drive #4 F	1629 Hendry Street Fort Myers		
ADDRESS OF BUSINESS ENTITY	Imaging and printing		oversize reproduction	document reproduction		
	Imaging and printi	ng				
BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD	Imaging and printin	ng	Director	Director		
BUSINESS ENTITY PRINCIPAL BUSINESS		ng	Director Y	Director Y		

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE (required):

DATE SIGNED (required): /2/03/08

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.

FILING INSTRUCTIONS:

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.