FORM 1 F

FINAL STATEMENT OF **FINANCIAL INTERESTS**

2014

(TO BE FILED WITHIN 60 DAYS OF LEAV	ING PUBLIC OFFICE OF	R EMPLOYMENT)	
LAST NAME — FIRST NAME — MIDDLE NAME:	NAME OF REPORTING PERSON'S	AGENCY:	
MAILING ADDRESS: NE, Ext. 1232		G (see "Who Must File" on page 3): 111 G STATE OFFICER MPLOYEE	
CITY: COUNTY:	SPECIFIED STATE EN		
FORM P133916 Lee			
BOTH PARTS OF THIS SECTION MUST BE COMPLETED DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2014 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS			
FILERS HAVE 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 INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")			
	SOURCE'S DESCRIPTION OF THE SOURCE'S ADDRESS PRINCIPAL BUSINESS ACTIVITY		
New Life type Assentiles 3328 Thomas &	TI CITIAL TO		
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") NAME OF MAJOR SOURCES ADDRESS PRINCIPAL BUSINESS			
BUSINESS ENTITY OF BUSINESS' INCOME	OF SOURCE	ACTIVITY OF SOURCE	
		 	
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")		NG INSTRUCTIONS for when where to file this form are ted at the bottom of page 2.	
	this	FRUCTIONS on who must file form and how to fill it out in on page 3 of this packet.	
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PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, write "none" or "n/a")			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
V \			
PART E — LIABILITIES [Major debts - See instructio (if you have nothing to report, write "non-		·	
NAME OF CREDITOR	ADDRESS (OF CREDITOR	
VINNE			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, write "none" or "n/a")			
NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	
ADDRESS OF BUSINESS ENTITY	1/1/1/1/1		
PRINCIPAL BUSINESS ACTIVITY	1/1/1/		
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;	DATE	SIGNED:	
Pastor Raymond Da	vis Dec	em/or 27 2014	
If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:			
I,, prepared the CE Form 1F in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.			
Signature		Date	
FILING INSTRUCTIONS:			
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WHAT TO FILE:

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted.

WHEN TO FILE:

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

WHERE TO FILE:

Local officers: file with the Supervisor of Elections of the county in which you 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: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

NOTE:

If you are leaving office or employment during the first half of 2014, you may not have filed Form 1 for 2013. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2013 by July 1, 2014, and risk being fined if you do not file Form 1 by the filing deadline, even if you have already filed the CE Form 1F.

State Number Ave. 51, 232 Fort Myers F1 339/6

SAINT PETERSON TO



Lee County Eventions Office Post Office Pax 2545 Fant Physis Fl. 33202 -2545

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