FORM 1	STATEMENT O	F	2010		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTER	ESTS			
LAST NAME - FIRST NAME - MIDDLE NAME  Dets har Marsa  MAILING ADDRESS:	Brooke	FOR OFFIC USE ONLY:			
1803 Ardmore Rd	·	-	ID Code		
CITY: ZIP FOR MULES 33° NAME OF AGENCY:		<b>1</b>	11 HN 0 SSAE		
Lee County Historic NAME OF OFFICE OR POSITION HELD OR S			P. Req. Code		
You are not limited to the space on the lines on the CHECK ONLY IF CANDIDATE OR	is form. Attach additional sheets, if necessary.  NEW EMPLOYEE OR APPOINTEE		<b>p</b> eren d <sup>2</sup>		
**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, 2010 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:					
REQUIRES FEWER CALCULATIONS, OR US	OPTION OF USING REPORTING THRESHOL BING COMPARATIVE THRESHOLDS, WHICH A BELOW WHETHER THIS STATEMENT REFLEC	RE USUALLY B CTS EITHER (mo	ASED ON PERCENTAGE VALUES (see		
PART A PRIMARY SOURCES OF INCOME (If you have nothing to report, you	[Major sources of income to the reporting person u must write "none" or "n/a")	1]			
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
Edison State College	8099 College Pkwy 33	3919	higher od		
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person] (If you have nothing to report, you must write "none" or "n/a")					
		ORESS OURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
NA					
PART C REAL PROPERTY [Land, buildings owned by the reporting person] (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 of page 2.		
2728 Provdence	Street, 33916	fi!	NSTRUCTIONS on who must le this form and how to fill it out egin on page 3.		
			OTHER FORMS you may need of file are described on page 6.		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]  (If you have nothing to report, you must write "none" or "n/a")					
TYPE OF INTANGIBL	.E	BUSINESS ENTITY TO WHICH THE	PROPERTY RELATES		
A . 1					
4 0					
PART E — LIABILITIES [Major deb	rts]				
, ,	report, you must write "none" or "				
NAME OF CREDITOR		ADDRESS OF CREDITOR			
Sunioast Schools FCU Matthews Drive, Ft Myers 3391					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]  (If you have nothing to report, you must write "none" or "n/a")					
(ii you nave nothing to i	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY					
ADDRESS OF BUSINESS ENTITY					
PRINCIPAL BUSINESS ACTIVITY	10/				
POSITION HELD WITH ENTITY	NB				
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 (I	DATE SIGNED (required):		
		22 May 2011			
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 the Senate must file prior to confirmation, even if that is less than 30 days from the date of the 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 politions.

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.

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Lee County Supernson of Electrons POBOX 2545 Fort Myers, FC 33902-2545

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