FORM 1		STATEMENT OF				2013
Please print or type your name, mailing address, agency name, and position below	<i>r</i> :	FINANCIAL	INTERE	ESTS		FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDLE NAME : DISTEFANO, PAUL, LOUIS				<b>'</b> 14	JUN 5 AM	11102 SOE LEE CO F1
MAILING ADDRESS : 12747 KENTWOOD AVE	-					
CITY: ZIP: COUNTY: FORT MYERS 33913 LEE  NAME OF AGENCY: TALIS PARK COMMUNITY DEVELOPMENT DISTRICT				\ \ /		
NAME OF OFFICE OR POSITION HELD OR SOUGHT : CHAIRMAN					HC	<b>,</b>
You are not limited to the space on the line CHECK ONLY IF		oform. Attach additional sheets,  NEW EMPLOYEE OR AP		pm	6/4	
**** 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, 2013 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:						
MANNER OF CALCULATING REPORTIVE STATES HAVE THE OPTION OF USING CALCULATIONS, OR USING COMPAGE OF THE ONE YOUR THEORY OF THE ONE YOU	RTABLE NG REI RATIVE OU ARE	EINTERESTS: PORTING THRESHOLDS THE THRESHOLDS, WHICH AR USING:	HAT ARE ABSOLU E USUALLY BASE	TE DOLL ED ON PE	AR VALU	ES, WHICH REQUIRES FEWER
						THRESHOLDS
PART A PRIMARY SOURCES OF IN (If you have nothing to rep			e reporting person -	See instru	ictionsj	
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
KITSON & PARTNERS		16990 LIVINGSTON RD NAPLES, FL 341		10	REAL ESTATE DEVELOPMENT	
PART B SECONDARY SOURCES ( [Major customers, clients, a (If you have nothing to re)	nd other	sources of income to business	es owned by the rep	porting per	son - See	instructions]
NAME OF BUSINESS ENTITY		E OF MAJOR SOURCES ADDR BUSINESS' INCOME OF SO				
NONE						
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")					FILING INSTRUCTIONS for when and where to file this	
NONE					form are located at the bottom	

INSTRUCTIONS on who must file this form and how to fill it

out begin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY (Storage of the control of t		ions]			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
401K	PERSONAL				
PART E — LIABILITIES [Major debts - See instructions (If you have nothing to report, write "none					
NAME OF CREDITOR	ADDRESS OF CREDITOR				
FRANKLIN AMERICAN MTG	501 CORPORATE CENTER DR. SUITE 400 FRANKLIN, TN 37067				
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")  BUSINESS ENTITY # 1  BUSINESS ENTITY # 2					
NAME OF BUSINESS ENTITY	NONE	NONE			
ADDRESS OF BUSINESS ENTITY					
PRINCIPAL BUSINESS ACTIVITY					
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 AR	E CONTINUED ON A SEPARATE SHEET	r, PLEASE CHECK HERE			
SIGNATURE (required):  DATE SIGNED (required):  6/4/14					
If a certified public accountant licensed under Chapte she must complete the following statement:  I,	prepared the CE Form 1 in accordance	with Section 112.3145. Florida Statutes, and			
Signature		Date			

### 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.

# **FILING INSTRUCTIONS:**

## 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: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

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/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment

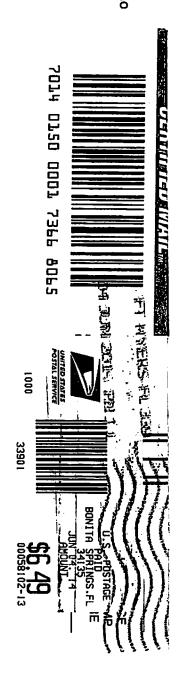
or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

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 tocal 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. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2013.

Talis Park – Paul DiStefano 16690 Livingston Rd. Naplęs, FL 34110



Lee County Supervisor of Elections 2480 Thompson Street Ft. Myers, FL 33901-3074

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