FORM 1	STATEM	ENT OF	2010	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS		
Durrett Alva Mailing address: 4253 Bay Beac	Edward h LN # 7-F	FOR OF USE OF		
Fort Myers Bear	ch FL 3393 zip: county:	1 Lee	ID Code ID No. ID No. Conf. Code P. Req. Code Co-	
NAME OF AGENCY: L.P.A NAME OF OFFICE OR POSITION HELD	OR SOUGHT :		Conf. Code P. Req. Code	
You are not limited to the space on the lines CHECK ONLY IF CANDIDATE C	on this form. Attach additional sheets.		D S	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FIN A FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2010	WWHETHER THIS STATEMENT IS	ECEDING TAX YEAR, WHETH	IER BASED ON A CALENDAR YEAR OR ON EAR ENDING EITHER (must check one):	
MANNER OF CALCULATING REPORTAL THE LEGISLATURE ALLOWS FILERS REQUIRES FEWER CALCULATIONS, O instructions for further details). PLEASE S COMPARATIVE (PERCENTAGE)	THE OPTION OF USING REPORT R USING COMPARATIVE THRESH TATE BELOW WHETHER THIS STA	IOLDS, WHICH ARE USUALI ATEMENT REFLECTS EITHER	RE ABSOLUTE DOLLAR VALUES, WHICH Y BASED ON PERCENTAGE VALUES (see the thick one): ALUE THRESHOLDS	
PART A PRIMARY SOURCES OF INC				
NAME OF SOURCE OF INCOME		RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Fish Tale Marina I SW Financial Cor			Manne Storage So-etc Property Management	
(If you have nothing to repondant Sources of NAME OF BUSINESS ENTITY	ort , you must write "none" or "n/a" NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
N.A.				
DADTO DEAL PROPERTY O 4 to	idings around by the seconds.			
PART C REAL PROPERTY [Land, bu (If you have nothing to repo	· · · · · · · · · · · · · · · · · · ·	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
Hish late Manna	-7225 Estero Blv	a 1740, FL	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.	
			OTHER FORMS you may need to 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 INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
Btocks		PFIZE	R - Ingersol			
PART E — LIABILITIES [Major debts] (If you have nothing to report, you must write "none" or "n/a") NAME OF CREDITOR ADDRESS OF CREDITOR						
NAME OF CREDIT	TOR		ADDRESS OF CREDITOR			
_ N A				\$		
				П		
				8		
	·					
PART F — INTERESTS IN SPECIFI (If you have nothing to	report, you must write	wnership or position e "none" or "n/a") ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
PART F — INTERESTS IN SPECIFI (If you have nothing to NAME OF BUSINESS ENTITY	report, you must write BUSINESS	e "none" or "n/a") ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
(if you have nothing to	BUSINESS	e "none" or "n/a") ENTITY # 1	Swfinnual	50%		
(If you have nothing to	BUSINESS	e "none" or "n/a") ENTITY # 1 Van na Blvd Fm8	BUSINESS ENTITY#2 Swfimnaal 1225 Esten Blvd FM	\$05		
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY	Fish Tau N 7235 Esten	e "none" or "n/a") ENTITY # 1 Van na Blvd Fm8	BUSINESS ENTITY#2 SWFIMMUAL 1225 Esten Blvd FM	\$05		
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY	Fish Tau M 7225 Esten Manne Stove	e "none" or "n/a") ENTITY # 1 Van na Blvd Fm8	BUSINESS ENTITY#2 Swfimnaal 1225 Esten Blvd FM	\$05		
(If you have nothing to NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5%	Fish Tal M 7225 Esten Manne Store President	e "none" or "n/a") ENTITY # 1 Van na Blud FMB ace Rout D	BUSINESS ENTITY#2 Swfimnaal 1225 Esten Blvd FM	\$05		
NAME OF BUSINESS ENTITY 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	Fish Tale M 7225 Esten Munne Stove President 502 Mar Parta	e "none" or "n/a") ENTITY # 1 Van na Blud FMR age Reput D	BUSINESS ENTITY#2 Swfimnaal 1225 Esten Blvd FM	507 .		
NAME OF BUSINESS ENTITY 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	Fish Tale M 7225 Esten Munne Stove President 502 Mar Parta	E CONTINUED	Business entity#2 Swfimnaal 1225 Esten Blvd FM Property Managemen	EASE CHECK HERE []		
NAME OF BUSINESS ENTITY 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	Fish Tale M 7225 Esten Munne Stove President 502 Mar Parta	E CONTINUED	BUSINESS ENTITY #2 SWFIM nual 1225 Esten Blvd FM Property Management ON A SEPARATE SHEET, PL DATE SIGNED	EASE CHECK HERE []		

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.

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.

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.

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