FORM 1	STATEM	STATEMENT OF		2012			
Please print or type your name, mailing address, agency name, and position below:		FINANCIAL INTERESTS		FOR OFFICE USE ONLY:			
LAST NAME - FIRST NAME - MIDDLE N DURRETT ALV MAILING ADDRESS : 425.3 BAY BOAC							
CITY: ZIP: COUNTY: FT Myous Beach FLA 33931 LEE NAME OF AGENCY:			l	·13MAY29AM1022 SDE			
NAME OF OFFICE OR POSITION HELD $\mathcal{L}, \mathcal{P}, \mathcal{A}$.			022 SUE				
You are not limited to the space on the lines of CHECK ONLY IF . CANDIDATE OF	if necessary. PPOINTEE		LEE ()				
**** 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): Image:							
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF SOURCE OF INCOME	SOUR ADDR	RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
FISH TALE MARIUA Social Jecurity		7225 EsteroBlue Forthposteric		H_ MARINA			
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")							
NAME OF N BUSINESS ENTITY	VAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
NONE							
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a") 7225 Esters Blue PORT Myers Beach FLA 33931 3210 Esters Blue FORT Myers Beach FLA, 3393				FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.			
				file this form and how to fill it out begin on page 3.			

PART D — INTANGIBLE PERSON (If you have nothing to				uctions]	_				
TYPE OF INTANGIBLE]	-	ICH THE PR					
STOCK		Enth	EUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
			FIRST INFRITENTLE THAT I THE STULL (DASI						
	<u></u>								
PART E — LIABILITIES [Major de	ts - See instruct	onsi			,,,,,_,,,,,,,,,,,,,,,,,,,,				
(If you have nothing to			n/a")						
	OR		ADDRESS OF CREDITOR						
N/A.						13			
						THH			
				_	<u> </u>	HEC.			
PART F INTERESTS IN SPECIFI	ED BUSINESSES	[Ownership or positi	ions in certain types of businesses	s - See instru	ctions]	220			
(If you have nothing to report, you must w BUSINE		write "none" or "n/a" ESS ENTITY # 1	") BUSINESS ENTITY #	2	ហ				
NAME OF BUSINESS ENTITY			NA-		NA.				
ADDRESS OF BUSINESS ENTITY	10.17					-0F			
PRINCIPAL BUSINESS ACTIVITY			<u> </u>			<u> </u>			
POSITION HELD WITH ENTITY	·		<u> </u>						
I OWN MORE THAN A 5%		<u></u>	 		<u></u>				
INTEREST IN THE BUSINESS NATURE OF MY		······································							
		ARE CONTINUE	D ON A SEPARATE SHE						
SIGNATURE (requi	<u>eu).</u>	1 -	DATE SIG		<u>equireu).</u>				
UV N	Jun	off &	5-27-	-13-					
			STRUCTIONS	-					
WHAT TO FILE:	<u> </u>	WHERE TO I			TO FILE:				
After completing all parts of this form, I		If you were mailed	If you were mailed the form by the Commission		each local off cer, and specified s	icer/employed			
only the first sheet (pages 1 and 2) for filing.		on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.		must file	within 30 days of	of the date			
If you have nothing to report in a particular		Local officers/employees file with the		his or her appointment or of the beginnin of employment. Appointees who must b					
section, you must write "none" or "n/a" in that section(s).		Supervisor of Elections of the county in which they permanently reside. (If you do not		confirmed by the Senate must file prior confirmation, even if that is less than 3 down from the data of their appointment					
		permanently resident Supervisor of the	de in Florida, file with the county where your agency	Candidat	days from the date of their appointmer Candidates for publicly-elected local offic				
MULTIPLE FILING UNNECESSARY:		has its headquarters.) State officers or specified state employees		must file at the same time they file the qualifying papers.					
for a calendar or fiscal year is not required		file with the Commission on Ethics, P.O. Drawer 15709, Tailahassee, FL 32317-5709.		Thereafter, local officers/employees, state officers, and specified state employee					
However, a candidate who previously filed		Candidates file this form together with their		are required to file by July 1st following each calendar year in which they hold the					
must at least file a copy of his or her original		qualifying papers. To determine what category your position falls		positions.					
u u		under, see the "Who Must File" Instructions on page 3.		Finally , at the end of office or employment each local officer/employee, state officer, and specified state employee is required to file					
			111 maa ka saa ah ah	final disclo	osure form (Form 1F) within 60 day			
		racsimiles w	Facsimiles will not be accepted.		of leaving office or employment. However filing a CE Form 1F (Final Statement Financial Interests) does <u>not</u> relieve the file				
				of filing a	CE Form 1 if he or s	she was in the			
				position o	n December 31, 201	IZ.			

