FORM 1 F FINAL STATEMENT OF					007	
		INTERESTS				
(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)						
LAST NAME - FIRST NAME - MIDDLE NAME: JUAMS SCOIT M MAILING ADDRESS: 13309 LAZZASO CT Stero F1 33928 Lee CITY: ZIP: COUNTY:		NAME OF REPORTING PERSON'S AGENCY: (ypress Shadows Development CDD) CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3): 4 LOCAL OFFICER STATE EMPLOYEE				
OFFICE OR EMPLOYMENT DESCR MANNER OF CALCULATING R THE LEGISLATURE ALLOWS FILER FEWER CALCULATIONS, OR USIN further details). PLEASE STATE BE COMPARATIVE (PER	IS THE OPTION OF USING REPORTING IG COMPARATIVE THRESHOLDS, WH LOW WHETHER THIS STATEMENT RE RCENTAGE) THRESHOLDS	IOD BETWEEN JANUARY 1, 2 ユーてひ - ひて S THRESHOLDS THAT ARE AB ICH ARE USUALLY BASED C FLECTS EITHER (check one): <u>QR</u> DOI	007 AND	97. (Date mist be trio to 1		
Lenner Homes LLC	DE INCOME [Major sources of incon SOUR ADDF /DUBI Six Min. FT Myer Fl	CE'S		RIPTION OF THE SOURCE'S ICIPAL BUSINESS ACTIVITY Plope-/Homeb-		
PART B SECONDARY SOUR NAME OF BUSINESS ENTITY	CES OF INCOME [Major customers, of NAME OF MAJOR SOURCES OF BUSINESS' INCOME	lients, and other sources of inc ADDRESS OF SOURCE	come to bu	Isinesses owned by reporting PRINCIPAL BUSINE ACTIVITY OF SOUR	SS	
PART C REAL PROPERTY [Land, buildings owned by the reporting person] FILING INSTRUCTIONS for						
PART C REAL PROPERTY [L	Land, buildings owned by the reporting p	ersonj	when locate INST this fe on pa OTH	RUCTIONS for and where to file this for ed at the bottom of page 3 RUCTIONS on who mu orm and how to fill it out ge 3 of this packet. ER FORMS you may ne re described on page 6.	m are 2. ist file begin	

1

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
		2				
		¥				
	1					
		06/ AR 13AM 112				
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	ADDRESS OF CREDITOR					

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		· ·				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
	S ENTITY # 1 BUSINESS ENTITY #	-				
NAME OF						
BUSINESS ENTITYADDRESS OF						
BUSINESS ENTITY						
PRINCIPAL BUSINESS ACTIVITY						
POSITION HELD WITH ENTITY						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS						
NATURE OF MY		· · · · · · · · · · · · · · · · · · ·				
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE: DATE SIGNED:						
FILING INSTRUCTIONS:						
WHAT TO FILE:	WHERE TO FILE:	NOTE:				
After completing all parts of this form on pages 1 and 2, including signing and dating it,	Local officers: file with the Supervisor of Elections of the county in which you perma-	If you are leaving office or employment during the first half of 2007, you may not				
send back only pages 1 and 2 for filing (you	hently reside. (If you do not permanently reside have filed Form 1 for 2006. In that case,					
need not return any of the instruction pages). Facsimiles will not be accepted.	in Florida, file with the Supervisor of the county where your agency has its headquarters.)	this is not the last form you will file, even though the Form 1F covers the final portion				
	State officers or specified state employ-	of your term of office or employment. You				
WHEN TO FILE: At the end of office or employment each	ees: file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709;	will be required to file Form 1 for 2006 by July 1 of 2007.				

physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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

on page 3.

Form 6.

At the end of office of 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