				
FORM 1	STATEM	IENT OF		2004
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	S	
LAST NAME FIRST NAME MIDDLE EVANS BLA		FOR C	DFFICE DNLY:	
MAILING ADDRESS PO BOX 221				Š
	20-1		ID Code	i de la companya de l
SAVIBEL 3	ZIP. COUNTY			
NAME OF AGENCY			No.	06JUN21AM1054SOELeeCo
SAIL HAPBOUR CO	MMUNITY DEVELOPM	ENT DISTEKT	Conf Code	# E
SIPERVISOR			P Req Code	<u>1</u>
CHECK ONLY IF CANDIDATE O	R NEW EMPLOYEE OR A	APPOINTEE		PDF 2004
	"BOTH PARTS OF THIS SEC	TION MUST BE COMPLETED	••	1 21 2004
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FIN	IANCIAL INTERESTS FOR THE PR	RECEDING TAX YEAR, WHET	THER BASED ON A CALEN	
DECEMBER 31, 2004	V WHETHER THIS STATEMENT IS OR SPECIFY	S FOR THE PRECEDING TAX TAX YEAR IF OTHER THAN		:heck one)
MANNER OF CALCULATING REPORTAL THE LEGISLATURE ALLOWS FILERS REQUIRES FEWER CALCULATIONS, O Instructions for further details) PLEASE S	THE OPTION OF USING REPOR R USING COMPARATIVE THRES	HOLDS, WHICH ARE USUAL	LLY BASED ON PERCENT	
COMPARATIVE (PERCENTAGE) 1		OR D	DOLLAR VALUE THRESH	IOLDS
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME	SOU	he reporting person) RCE'S PRESS	DESCRIPTION OF T	
EH BillDING GRAIP II	4227 NORTHLAKE B	LVD, PB4,FL 33414	HOME BUILT	DING
PART B SECONDARY SOURCES OF I	NCOME [Major customers clients	and other sources of income to	businesses owned by the	reporting person)
	NAME OF MAJOR SOURCES OF BUSINESS INCOME	ADDRESS OF SOURCE	PRINCIF	PAL BUSINESS Y OF SOURCE
NA				
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PART C REAL PROPERTY (Land, build	ngs owned by the reporting person	1]	FILING INSTRUC and where to file this ed at the bottom of p	form are locat-
			INSTRUCTIONS of this form and how to on page 3.	
			OTHER FORMS y file are described on	

	NGIBLE	 	BUSINESS ENTITY TO WHICH THE	PROPERTY RELATES	
		1			
PART E — LIABILITIES (Major debts) NAME OF CREDITOR			ADDRESS OF CREDITOR		
······································					
RT F — INTERESTS IN SPEC	CIFIED BUSINESSES (O	Ownership or positi	ons in certain types of businesses)		
RT F — INTERESTS IN SPEC	•		ons in certain types of businesses) BUSINESS ENTITY # 2	BUSINESS ENTITY#3	
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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

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. 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 the 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 posi-

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