FORM 1	STATEMENT OF			2012
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	5	FOR OFFICE USE ONLY:
LAST NAME - FIRST NAME - MIDDLE N FELTON FOOIR	AME:			
MAILING ADDRESS: 1623 NE 367	t Street			
CAPE CORAL	zip: county: 33909 Le	<u>e</u>	V	13JUNOGAMOS48 SOE
NAME OF AGENCY: HOMEOWNERSHI	o Resource	CENTER		E E
NAME OF OFFICE OR POSITION HELD	IRECTOR			Lee (0) F1
You are not limited to the space on the lines of CHECK ONLY IF CANDIDATE OF	on this form. Attach additional sheets	•		
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FI YEAR OR ON A FISCAL YEAR. PLEASE EITHER (must check one): DECEMBER 31, 2012 MANNER OF CALCULATING REPORTA THE LEGISLATURE ALLOWS FILERS TO REQUIRES FEWER CALCULATIONS, O (see instructions for further details). CHE	STATE BELOW WHETHER TH OR SPECIFY SPE	E PRECEDING TAX YEAR, W IS STATEMENT IS FOR THE TAX YEAR IF OTHER THAN ING THRESHOLDS THAT AF SHOLDS, WHICH ARE USUA	THE CA	R BASED ON A CALENDAR DING TAX YEAR ENDING ALENDAR YEAR: DLUTE DOLLAR VALUES, WHICH
PART A PRIMARY SOURCES OF INCO				THRESHOLDS
NAME OF SOURCE	t, you must write "none" or "n/a") SOURCE'S		DESCRIPTION OF THE SOURCE'S	
Home Dwalership Ressurce	2915 COLONIAL BLUE Suite 200		HOUSING COUNSELING	
				
PART B SECONDARY SOURCES OF I [Major customers, clients, and c (If you have nothing to report	ther sources of income to business	ses owned by the reporting pers	son - See	instructions]
NAME OF N BUSINESS ENTITY	AME OF MAJOR SOURCES ADDRESS OF BUSINESS' INCOME OF SOURCE			PRINCIPAL BUSINESS ACTIVITY OF SOURCE
U.S. NAVY		U.S. GOVERNMEN		Retired
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")			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.	
1673 NE 36 TH STREET CAPE CORAL, FL 33909				
CAFE CORAL, FL	33704		file th	RUCTIONS on who must is form and how to fill it egin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, you must write "none" or "n/a")						
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
1/2-1/2						
110/11						
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, you must write "none" or "n/a")						
NAME OF CREDITOR		ADDRESS OF CREDITOR				
1/0/10 -						
TUON)3#m0948			
			308			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, you must write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3						
NAME OF BUSINESS ENTITY	, ,					
ADDRESS OF BUSINESS ENTITY						
PRINCIPAL BUSINESS ACTIVITY	11/11	/				
POSITION HELD WITH ENTITY	1010					
OWN MORE THAN A 5% INTEREST IN THE BUSINESS						
NATURE OF MY OWNERSHIP INTEREST						
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required): DATE SIGNED (required): 5/29/2013						
FILING INSTRUCTIONS:						

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.

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.

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/employer state officer, and specified state employer must file within 30 days of the date whis or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior confirmation, even if that is less than 3 days from the date of their appointment.

Candidates for publicly-elected local office must file at the same time they file the 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 the positions.

Finally, at the end of office or employme each local officer/employee, state officer, a specified state employee is required to file final disclosure form (Form 1F) within 60 day of leaving office or employment. However filing a CE Form 1F (Final Statement Financial Interests) does not relieve the file of filing a CE Form 1 if he or she was in the position on December 31, 2012.



Homeownership Resource Center of Lee County 2915 Colomal Blvd. Suite 200 Fort Myers Florida 33966

SUPERVISOR OF ELECTIONS PO BOX 2545 FORT MYERS FL 33902-2545

