FORM 1	STATEMENT OF						
FINANCIAL INTERESTS							
LAST NAME FIRST NAME MIDDLE		NAME OF REPORTING PE	RSON'S AGENCY:				
FOWLER, KOBE MAILING ADDRESS:	RT B.	SMART GROWTH					
17500 FOWLERS	WAI	CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):					
ALVA FL 3392		 LOCAL OFFICER CANDIDATE CANDIDATE SPECIFIED STATE EMPLOYEE 					
CITY: ZIP:	COUNTY	LIST OFFICE OR POSITION HELD OR SOUGHT:					
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 (check one): DECEMBER 31, 2000 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: <u>2001</u> MANNER OF CALCULATING REPORTABLE INTERESTS: PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VAL- UES. BEGINNING IN 2001, THE LEGISLATURE HAS ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATE- MENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS (old method) OR DOLLAR VALUE THRESHOLDS (new method)							
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME	OME [Major sources of income to th SOUR(ADDR	CE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
THE FOWLER COMPAN	NY 10181 -2 JIX 1	MILE CYPRESS	GENERAL CONTRACTOR				
	FORT MYERS,						
	,		PECEIVED				
			JAN 22 2002				
			SUPERVISON				
			ELECTIONS				
PART B SECONDARY SOURCES OF I	NCOME [Major customers, clients,	and other sources of income to	businesses owned by the reporting person]				
NAME OF BUSINESS ENTITY			ADDRESS PRINCIPAL BUSINESS OF SOURCE ACTIVITY OF SOURCE				
The Ander Co Es	st Coast Lestoucants	3040 Saleso Block	restaurant.				
The trupes, Co. Fit	1B Jue Control Dust	POBAL 2880	the station				
The Towler Co. MTC Key Plana LP		50 rece Blod	No Center hopping				
The Towler Co. 631	25 hour & Mc Kinnen	3783 Hard The FM FL 335	Reporte henoffice				
PART C - REAL PROPERTY [Land, buildings owned by the reporting person] Residence: 17500, Forders Way, alon, FL 33920 Condo. 15460+3 admiralty Cir, 1, 54 Magers 33917			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.				
Ondo. 15460#34d	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.						
			OTHER FORMS you may need to file are described on page 6.				

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]						
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
1. /A						
/						
PART E LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
N/H						
·						
PART F INTERESTS IN SPECIF	ED BUSINESSES [Ownership or pos	itions in certain types of businesses]		
	BUSINESS ENT		BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	. <u> </u>					
ADDRESS OF BUSINESS ENTITY			· · · · · · · · · · · · · · · · · · ·			
PRINCIPAL BUSINESS ACTIVITY			<u> </u>			
POSITION HELD WITH ENTITY						
I 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:

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 UNNECES-SARY:

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.

FILING INSTRUCTIONS:

Local officers file with the Supervisor of Elections of the county in which you 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 your qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

WHEN TO FILE:

DATE SIGNED:

Initially, each local officer, 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.

1-17-02

Candidates for publicly-elected local office must file at the same time they file their quali-fying papers.

Thereafter, local officers, 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, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.