FORM 1 STATEMENT OF FINANCIAL INTERESTS 1999 THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE NAME OF YOUR AGENCY: PRECEDING TAX YEAR ENDING: CHECK EITHER OR SPECIFY TAX YEAR IF OTHER Lee County Dept. of Community Development DECEMBER 11, 1999_ THAN THE CALENDAR YEAR: CHECK ONE OF THE FOLLOWING CATEGORIES: LAST NAME - FIRST NAME - MIDDLE NAME: Gibbs, Mary L. LOCAL OFFICER D STATE OFFICER D CANDIDATE MAILING ADDRESS: 5785 Trailwinds Drive #223 □ SPECIFIED STATE EMPLOYEE 33907 Ft. Myers Lee LIST OFFICE OR POSITION HELD OR SOUGHT: Director CITY: ZIP: COUNTY: Community Development NOTICE: Under provisions of Sec. 112.317, Florida Statutes, a failure to make any required disclosure constitutes grounds for and may be punished by one or more of the following: disqualification from being on the ballot, impeachment, removal or suspension from office or employment, demotion, reduction in salary, reprimand, or a civil penalty not exceeding \$10,000. PART A — PRIMARY SOURCES OF INCOME [Sources exceeding 5% of gross income] NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S OF INCOME **ADDRESS** PRINCIPAL BUSINESS ACTIVITY PART B — SOURCES OF INCOME TO BUSINESSES OWNED BY THE REPORTING PERSON [Major customers, clients, etc.] NAME OF SOURCE OF SOURCE'S **DESCRIPTION OF THE SOURCE'S BUSINESS ENTITY'S INCOME ADDRESS** PRINCIPAL BUSINESS ACTIVITY PART C - REAL PROPERTY [Land, buildings] FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. **INSTRUCTIONS** on who must file this form and how to fill it out begin on page 3 of thispacket. OTHER FORMS you may need to file are described on page 6. (Continued on p.2)

CE FORM 1 - EFF. 1/2000

PART D — INTANGIBLE PERSONAL PROPERTY [Sto		ocks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
CAP Account		First	Union	National	Bank	o f	Florida,	Ft.	Myers
Manual Ma				,					
PART E — LIABILITIES IN EXCES	SS OF NET WORTH	[Major debts]		·					
NAME OF CREDITOR		ADDRESS OF CREDITOR							

PART F — INTERESTS IN SPECIFI	IED BUSINESSES [Ownership or po	sitions in cer	ain types of busin	esses]				
·								BUSINESS ENTITY # 3	
	BUSINESS ENT	TTY # 1	BUS	INESS ENTITY #	2		BUSINESS ENT	TITY #3	
NAME OF BUSINESS ENTITY	BUSINESS ENT	TTY # 1	BUS	INESS ENTITY #	2		BUSINESS ENT	TITY#3	
	BUSINESS ENT	TTY # 1	BUS	INESS ENTITY #	2		BUSINESS ENT	TITY#3	
BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS	BUSINESS ENT	TTY # 1	BUS	NESS ENTITY #	2		BUSINESS ENT	FITY #3	
BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD	BUSINESS ENT	TTY # 1	BUS	INESS ENTITY #	2		BUSINESS ENT	FITY # 3	
BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY	BUSINESS ENT	TTY # 1	BUS	INESS ENTITY #	2		BUSINESS ENT	FITY #3	
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BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5% INTEREST IN THE BUSINESS NATURE OF MY							BUSINESS ENT	FITY # 3	

FILING INSTRUCTIONS FOR FORM 1

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: You also may be required to file Form 10, which is the last page of this packet. Please see that form for detailed instructions.

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: 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 Department of State, Room 1802, The Capitol, Tallahassee, Florida 32399-0250. 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. If you were mailed the form by the Secretary of State or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

WHEN TO FILE: 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.

Thereafter, *local officers*, *state officers*, and *specified state employees* are required to file by July 1st following each calendar year they hold their positions. *Candidates* for publicly-elected state or local office must file at the same time they file their qualifying papers.

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