FORM 1 F

FINAL STATEMENT OF FINANCIAL INTERESTS

2009

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

(10 BE FILED WITHIN 00 DATS OF LEAV	ING TOBLIC OFFICE OR EMILEOTMENT)		
LAST NAME - FIRST NAME - MIDDLE NAME	NAME OF REPORTING PERSON'S AGENCY:		
well LISA pan			
MAILING ADDRESS:	CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):		
502 Empul able 5	LOCAL OFFICER STATE OFFICER		
Lehich F/. 33974	SPECIFIED STATE EMPLOYEE		
ragagn 11 a	LIST OFFICE OR POSITION HELD:		
CITY: ZIP: COUNTY:			
fle			
BOTH PARTS OF THIS SECTION MUST BE COMPLETED			
DISCLOSURE PERIOD:			
THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2009 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE. WHICH DATE WAS			
OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS			
MANNER OF CALCULATING REPORTABLE INTERESTS: THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES. WHICH FEQUIRES			
FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PER JEN JACE VALUES (see instructions for			
further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check or s):			
COMPARATIVE (PERCENTAGE) THRESHOLDS	OR DOLL RYALUE THRESHOLDS		
PART A PRIMARY SOURCES OF INCOME [Major sources of income	ne to the reporting person		
NAME OF SOURCE SOUR	CE'S DESCRIPTION OF THE SOURCE'S		
OF INCOME ADDR	RESS PRINCIPAL BUSINESS ACTIVITY		
Haw Goelly Son Empire a	in & Lehigh owner of All comp.		
<u> </u>			
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by reporting person]			
NAME OF NAME OF MAJOR SOURCES BUSINESS ENTITY OF BUSINESS' INCOME	ADDRESS PRINCIPAL BUSINESS OF SOURCE ACTIVITY OF SOURCE		
DUSINESS ENTITY OF BUSINESS INCOME	OF SOURCE ACTIVITY OF SOURCE		
PART C REAL PROPERTY [Land, buildings owned by the reporting person] FILING INSTRUCTIONS for			
	when and where to file this form are		
Nome at 500 Empere and Le	keg 4 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 this packet.		
	OTHER FORMS you may need to file are described on page 6.		
	The are described on page b.		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
0/10			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	1		
NAME OF CREDITOR	ADDRESS	S OF CREDITOR	
sun it			
No charle	1007		
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\$ ***			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]			
NAME OF	S ENTITY #1 BUSINESS ENTITY #	BUSINESS ENTITY # 3	
ADDRESS OF			
PRINCIPAL BUSINESS ACTIVITY	11/4		
POSITION HELD WITH ENTITY	N		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			
OWNERGHIF INTEREST			
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE			
SIGNATURE:	DATE S	signed: 11-109	
FILING INSTRUCTIONS:			
WHAT TO FILE: After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted.	WHERE TO FILE: Local officers: file with the Supervisor of Elections of the county in which you permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)	NOTE: If you are leaving office or employment during the first half of 2009, you may not have filed Form 1 for 2008. In that case, this is not the last form you will file, even though the Form 1F covers the final portion	
WHEN TO FILE: At the end of office or employment each local officer, state officer, and specified state	State officers or specified state employ- ees: file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard,	of your term of office or employment. You will be required to file Form 1 for 2008 by July 1 of 2009.	

South, Suite 201, Tallahassee, FL 32312.

on page 3.

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

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Form 6.

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

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