FORM 1F

FINAL STATEMENT OF FINANCIAL INTERESTS

2017

(10 BE LITED A	TIHIN 60 D	AYS OF LEAV			EMPLOYMENT)	
LAST NAME — FIRST NAME — MIDDLE NAME:			NAME OF REPORTING PERSON'S AGENCY:			
Green James W			NAME OF REPORTING PERSON'S AGENCY: Lee County Local Planning Agency Lee County Affordable Housing Committee CHECK ONE OF THE FOLLOWING (see "Who Must File" on page OF THE FOLLOWING (see "Who Must File" on			翠岩
MAILING ADDRESS: 14801 Palm Beach Boulevard, Suite 100			CHECK ONE OF THE FOLLOWING (see "Who Must File" on page			je 😜
			☐ LOCAL OF	FICER C	STATE OFFICER	93
			☐ SPECIFIE	O STATE EMI	PLOYEE Member and Chairman	Ω Ω
CITY: ZIP:		COUNTY:	LIST OFFICE OR POS	TION HELD:		_
Fort Myers 33905		Lee respectively				
	***BOTH PAI	RTS OF THIS SEC	TION MUST BE COMP			Ţ
DISCLOSURE PERIOD:	<u> </u>					
THIS STATEMENT REFLECTS MY F OFFICE OR EMPLOYMENT DESCR					THE LAST DATE I HELD THE 017. (Date must be prior to	
MANNER OF CALCULATING RI				- Contract of the Contract of		•
FILERS HAVE THE OPTION OF CALCULATIONS, OR USING COMP	USING REPORT	ING THRESHOLDS	THAT ARE ABSOLUTE	DOLLAR VA	LUES WHICH REQUIRES	FEWER
details). PLEASE STATE BELOW W	HETHER THIS ST	ATEMENT REFLECT	S EITHER (must check or	e):	VALUES (SPE-Instructions	or turtner
☑ COMPARATIVE (PER	CENTAGE) THRE	SHOLDS	OR 🗆 👸	OLAR VAL	VE THRESHOLDS	The same
PART A - PRIMARY SOURCES	OF INCOME IM	laior sources of incon	ee to the reporting person	SA LETTONIC		
(If you have nothing to	report, write "non	ie" or "n/a")	le to the reporting person -	see msuucuc	ms) B	
NAME OF SOURCE OF INCOME						_
See Attached		ADDR	_55 FRIN		ICIFAL BUSINESS ACTIVITI	
		-			-	
·····			3-12			
					····	
PART B - SECONDARY SOURI [Major customers, clients	, and other source	s of income to busine	sses owned by reporting pe	erson - See in	structions]	
(If you have nothing to NAME OF	•	ne" or "n/a") AJOR SOURCES	ADDRESS		PRINCIPAL BUSIN	FSS
BUSINESS ENTITY		IESS' INCOME	OF SOURCE		ACTIVITY OF SOU	
See Attached						
						<u></u>
PART C - REAL PROPERTY [Li (If you have nothing to			erson - See instructions]	and v	IG INSTRUCTIONS for where to file this form	are
See Attached				-	ed at the bottom of pa	_
				this f	RUCTIONS on who mu form and how to fill it	out
			2 12 1	begir	on page 3 of this page	cket.
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PART D — INTANGIBLE PERSONAL PROPERTY		icates of deposit, etc See	instructions]		
' (If you have nothing to report, write "none	·	USINESS ENTITY TO WHI	SS ENTITY TO WHICH THE PROPERTY RELATES		
None					
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "none"					
NAME OF CREDITOR		ADDRESS OF CREDITOR			
NA					
PART F — INTERESTS IN SPECIFIED BUSINESSE (If you have nothing to report, write "none" NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	or "n/a")	sitions in certain types of bu	usinesses - See instructions] BUSINESS ENTITY # 2		
NATURE OF MY OWNERSHIP INTEREST					
IF ANY OF PARTS A THROUGH F ARE	CONTINUED OF	N A SEPARATE SHE	ET, PLEASE CHECK HERE		
SIGNATURE OF FILER: Signature: Date Signed:		CPA or ATTORNEY SIGNATURE ONLY If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement: I,			

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.

WHEN TO FILE:

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, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

FILING INSTRUCTIONS:

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 Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303.

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

NOTE:

If you are leaving office or employment during the first half of 2017, you may not have filed Form 1 for 2016. In that case, this is not the last form you will file. Form 1F covers January 1, 2017, through your last day of office or employment. You will be required to file Form 1 for 2016 by July 1, 2017, and risk being fined if you do not file Form 1 by the filing deadline, even if you have already filed the CE Form 1F.

Attachment to Form 1F 2017, James W. Green

Period: January 1 2017 - December 31 2017

Part A

Name of Source	Address	Activity
Jim Green Realty	14801 Palm Beach Blvd. Ft Myers 33905	Real Estate Brokerage
Social Security Administration	Washington DC	Social Security
Riverdale Learning Academy Inc.	14801 Palm Beach Blvd. Ft Myers 33905	Child Care
PF&M Limited Partnership	14801 Palm Beach Blvd. Ft Myers 33905	Wholesale Jewelry

Part B

Business Entity	Name	Address	Activity
PF&M Limited Partnership	Mitsukosi USA Inc.	1780 Avenue of the Stars, Lake Buena Vista, FL 32830	Retail Store
	SeaWorld Parks & Entertainment, Inc.	9205 SouthPark Center Loop, Suite 400 / Orlando, FL 32819	Theme Park
The Riverdale Center	Gail Day	14801 Palm Beach Blvd. Ste 301 Ft Myers 33905	Hair Salon

Part C

Real Property

1561 Lee Ave, Alva FL 33920

14801 Palm Beach Boulevard, Fort Myers FL 33905

Lots 2,5,7,9,11, 12, 13, & 15-18, Caloosa Shores Subdivision, LaBelle FL 33935

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Supervisor of Elections POBOX 2545 Ft. Myers, FL 33902-2545

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Fort Myers, FL 33905
(239) 728-5481 • www.jimgreenrealty.com