FORM 1		STATEM	V	2000					
FINANCIAL INTERESTS									
LAST NAME - FIRST NAME - MIDDLE NAME: Green Katherine Causey MAILING ADDRESS: 3451 Bonita Bay Blud. Suite 202 CITY: ZIP: COUNTY: Bonita Springs 34134 Lee			NAME OF REPORTING PERSON'S AGENCY: Meditera North & South Community Development Districts CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3): LOCAL OFFICER STATE OFFICER CANDIDATE SPECIFIED STATE EMPLOYEE LIST OFFICE OR POSITION HELD OR SOUGHT: Bard Member for each District						
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: PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VALUES. 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 STATEMENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS (old method) OR DOLLAR VALUE THRESHOLDS (new method)									
PART A - PRIMARY SOURCES OF INCOME [Major sources of income to the NAME OF SOURCE SOURCE OF INCOME I ADDR			CE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY					
Bonita Bay Gro. Adelaide Fairbank		3451 Bonita B Natility Trust D Cleveland,		Res	idential De nily Trust	veloper			
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY	NAM	ME [Major customers, clients, E OF MAJOR SOURCES BUSINESS'S INCOME	and other sources of income to ADDRESS OF SOURCE	business	ses owned by the report PRINCIPAL E ACTIVITY OF	BUSINESS			
PART C REAL PROPERTY [Land, buildings owned by the reporting person]					FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.				
10. Mg on to E vall					INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.				
SNOLUHIA					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								
Various Mutual Funds	Pers	Personal						
				<u> </u>				
		,						
PART E LIABILITIES [Major debts]								
NAME OF CREDITOR	<u> </u>	ADDRESS OF CREDITOR						
Northern Trust Bank	8099	8099 Coilege Pkwy, Fort MyERS						
PART F — INTERESTS IN SPECIFIED BUSINESS	ES [Ownership or po	ositions in certain types of busines	sses]					
BUSINES NAME OF	S ENTITY # 1	NTITY # 1 BUSINESS ENTITY # 2		BUSINESS ENTITED 3				
BUSINESS ENTITY ADDRESS OF		 		3 10				
BUSINESS ENTITY PRINCIPAL BUSINESS								
ACTIVITY POSITION HELD WITH ENTITY				# 50 S				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		<u> </u>		D Ph				
NATURE OF MY OWNERSHIP INTEREST				°0				
IF ANY OF PARTS A THROUGH F	ARE CONTINUE	ED ON A SEPARATE SHE	ET, PLE	EASE CHECK HERE				
1/ /.				,				
SIGNATURE: Kathering When DATE SIGNED: 4/24/01								
	FILING IN	STRUCTIONS:						
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 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.		Initiall specifi days of the be	WHEN TO FILE: nitially, each local officer, state officer, and pecified state employee must file within 30 lays of the date of his or her appointment or of the beginning of employment. Appointees who				
NOTE: MULTIPLE FILING UNNECES-SARY:	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.)			aust be confirmed by the Senate must file prior confirmation, even if that is less than 30 ays from the date of their appointment. Candidates for publicly-elected local office aust file at the same time they file their qualifing papers.				
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	with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709.		There specifi	Thereafter, local officers, state officers, and specified state employees are required to file by July 1st following each calendar year in				

Candidates file this form together with your qual-

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

ifying papers.

on page 3.

which they hold their positions.

office or employment.

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

another public position must at least file a copy of his or her original Form 1 when qualifying.