FORM 1		STATEM	IENT OF		2000
	-	FINANCIAL	INTERESTS	}	
LAST NAME — FIRST NAME — MID	DLE NAM	E:	NAME OF REPORTING PE	RSON'S AGE	=NCY:
HAGERUP	_				
MAILING ADDRESS:	7.0	1307	CAPTIVA EROSION	PRENENT	ICA DISTRICT
P.O. BOX 365	5		CHECK ONE OF THE FOL	LOWING (see	e "Who Must File" on page 3):
CAPTIVA 33	924	1 LEE	LOCAL OFFIC CANDIDATE		STATE OFFICER SPECIFIED STATE EMPLOYEE
CITY: ZIP:		COUNTY:	LIST OFFICE OR POSITIO		SOUGHT:
			ADMINISTRA	To/C	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU A FISCAL YEAR. PLEASE STATE B DECEMBER 31, 2000 MANNER OF CALCULATING REPO PRIOR TO 2001, THE THRESHOLDS UES. BEGINNING IN 2001, THE LEG DOLLAR VALUES, WHICH REQUIRE MENT REFLECTS EITHER (check of	RTABLE I S FOR RE GISLATUR ES FEWER ne):	HETHER THIS STATEMENT IS OR	E FOR THE PRECEDING TAX TAX YEAR IF OTHER THAN ESTS WERE COMPARATIVE, HE OPTION OF USING REPO ctions for further details). PLE	YEAR ENDIN THE CALENC USUALLY BA RTING THRE ASE STATE B	IG EITHER (check one): DAR YEAR: ASED ON PERCENTAGE VAL- SHOLDS THAT ARE ABSOLUTE
PART A PRIMARY SOURCES OF NAME OF SOURCE OF INCOME	SOUR			TION OF THE SOURCE'S AL BUSINESS ACTIVITY	
CAPTIVA ERISIAN PREVENTION		BUX 365 CAPTIVA 33924		EROSIO	N CONTREL
PISTMCT					
PART B SECONDARY SOURCES NAME OF		ME [Major customers, clients,	and other sources of income to	businesses o	owned by the reporting person] PRINCIPAL BUSINESS
BUSINESS ENTITY	1	BUSINESS'S INCOME	OF SOURCE		ACTIVITY OF SOURCE
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· · · · · · · · · · · · · · · · · · ·					
PART C REAL PROPERTY (Land	buildings	owned by the reporting person	nì	FILING	INSTRUCTIONS for

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.

when and where to file this form are located at the bottom of page 2.

PART D — INTANGIBLE PERSO TYPE OF INTAN		ks, bonds, certifica	tes of deposit, etc.] BUSINESS ENTITY TO WHICH THE	PROPERTY RELATES	
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR			
PART F — INTERESTS IN SPEC	CIFIED BUSINESSES [Ownership or posit	ions in certain types of businesses]	:	
	CIFIED BUSINESSES [I		ions in certain types of businesses] BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY				BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY				BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY				BUSINESS ENTITY # 3	
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NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5%				BUSINESS ENTITY # 3	
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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 NATURE OF MY OWNERSHIP INTEREST	BUSINESS ENT	TITY#1	BUSINESS ENTITY # 2		
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 NATURE OF MY OWNERSHIP INTEREST	A THROUGH F ARE	E CONTINUED	ON A SEPARATE SHEET, PLI	EASE CHECK HERE	

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.

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.

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:

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.

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