FORM 1	STATEM	STATEMENT OF		2013	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS		FOR OFFICE USE ONLY:	
LAST NAME - FIRST NAME - MIDDLE	NAME:		 -J		
MAILING ADDRESS: 865 Adolph:	Cont			. •	
ous recipin	CORT			145E	
CITY:	ZIP: 22 COUNTY:			716PF	
For + Myers NAME OF AGENCY:	33919 COUNTY: L.	u		14SEP16FMO409 SLE	
Beach Road Golf Estates Community Development District		vict		S S	
NAME OF OFFICE OR POSITION HELD BOALD MEMBER				10 E	
You are not limited to the space on the lines		if necassary.	1.	9 E	
CHECK ONLY IF CANDIDATE C	R NEW EMPLOYEE OR A	PPOINTEE NO			
**** BOTH PARTS OF THIS SECTION MUST BE COMPLETED **** 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 (must check one):					
DECEMBER 31, 2013		TAX YEAR IF OTHER THAN	THE CA	LENDAR YEAR:	
MANNER OF CALCULATING REPORT FILERS HAVE THE OPTION OF USING CALCULATIONS, OR USING COMPAR further details). CHECK THE ONE YOU	G REPORTING THRESHOLDS T ATIVE THRESHOLDS, WHICH A	HAT ARE ABSOLUTE DOLLA RE USUALLY BASED ON PE	AR VALU	JES, WHICH REQUIRES FEWER AGE VALUES (see instructions for	
☐ COMPARATIVE (PER	CENTAGE) THRESHOLDS	DR DOLLAR	VALUE '	THRESHOLDS	
PART A - PRIMARY SOURCES OF INC (if you have nothing to repor		e reporting person - See instru	ctions)	-	
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Herstage Palms Golf - Country C	lub 10420 Washingtonia Palm	hingtonia falm Way FortMycs 33966 Golf Course		If lourse	
PART B — SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")					
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME			PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
N/A					
•					
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
•			INSTE	- RUCTIONS on who must	
				is form and how to fill it egin on page 3.	

PART D — INTANGIBLE PERSONAL PROPERTY [Sto (If you have nothing to report, write "none	ocks, bonds, certificates of deposit, etc See instructions] e" or "n/a")			
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
N/A				
1.47				
PART E — LIABILITIES [Major debts - See instructions (If you have nothing to report, write "none	ADDRESS OF CREDITOR F.O. Box 5215 Carol Stream, Illianis 60197			
NAME OF CREDITOR	ADDRESS OF CREDITOR			
Volkswagen Credit	P.O. Box 5215 Carol Stream, Illinois 60197			
	E E			
PART F — INTERESTS IN SPECIFIED BUSINESSES [((if you have nothing to report, write "none" NAME OF BUSINESS ENTITY	Ownership or positions in certain types of businesses - See instructions] or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2			
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				
IF ANY OF PARTS A THROUGH F AF	RE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE			
SIGNATURE (required):	DATE SIGNED (required):			
Ollex Hemelaugh	9/15/14			
If a certified public accountant licensed under Chapt she must complete the following statement:	ter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or			
	, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and			
the instructions to the form. Upon my reasonable kn	nowledge and belief, the disclosure herein is true and correct.			
	·····			
Signature	Date			
FILING INSTRUCTIONS:				

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 have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

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:

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/employees file with the Supervisor of Elections of the county in which they 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, FL 32303.

Candidates file this form together with their qualifying papers.

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

Facsimiles will not be accepted.

WHEN TO FILE:

Initially, each local officer/employee, 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/employees, 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/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2013.

Alex Hivebough 10481 six Mile Geness Awy Fut Myers, AL. 3391 6



Lec lownty Supernsor of Elections
Po Box 2545
Fort Mycrs, FL

33902