FORM 1		STATEMENT OF				2012	
Please print or type your name, mailing address, agency name, and position be	ow:	FINANCIAL	INTERI	ESTS	5	FOR OFFICE USE ONLY:	
LAST NAME - FIRST NAME - MIDDLE NAME : Holguist Laura Ann Mailing Address : 15696 Light Blue Circle					_	۲ ۲ ۱	
CITY: ZIP: COUNTY: Fort Myex 33908 Lee NAME OF AGENCY: SW FL REGIONAL Planning Council NAME OF OFFICE OR POSITION HELD OR SOUGHE						1311AY29AH 1012 SOE LEE OPF	
You are not limited to the space on the				цц			
CHECK ONLY IF 🔲 CANDIDATE	OR		PPOINTEE				
**** 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, 2012       OR         OPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:         MANNER OF CALCULATING REPORTABLE INTERESTS:         THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING:         OPECAMPARATIVE (PERCENTAGE) THRESHOLDS							
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]							
(If you have nothing to report, you must write "none" or "n/a")							
NAME OF SOURCE			RCE'S RESS			SCRIPTION OF THE SOURCE'S	
ALLETE, Inc		30 W. Superin	rst Dubit	h, HN	Ene	глу Со.	
• ···	<u></u>	' '					
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		ADDRESS OF SOURCE			PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
- None							
· · · · · · · · · · · · · · · · · · ·							
PART C - REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a")					FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
					INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.		

PART D INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIB		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
Bank Account - Ha	by Hkt Real	Regions Bank					
stock	ALLI	ALLBTE Inc					
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, you must write "none" or "n/a")							
	OR	ADDRESS OF CREDITOR					
None			HE				
	······································						
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, you must write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSI							
NAME OF BUSINESS ENTITY	LAH Gorip Advisor		·····				
ADDRESS OF BUSINESS ENTITY	15244 Light Blue Ci						
PRINCIPAL BUSINESS ACTIVITY	Consulting, busine	22					
POSITION HELD WITH ENTITY	President						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes, 100%						
NATURE OF MY OWNERSHIP INTEREST	Principa)						
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required): DATE SIGNED (required):							
Lam a. Hot	quist	5/24/	2013				
FILING INSTRUCTIONS:							
WHAT TO FILE:	WHERE TO FILE: WHEN 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.

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.

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.

*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, 2012.

