FORM 1	STATEM	ENT OF		2011			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERE	STS				
LAST NAME FIRST NAME MIDDLE N HONC KENNE MAILING ADDRESS:			FOR OFFICE USE ONLY:				
7015 HOWARD	ROAD		/	Code 53			
BOKEELIA, FL			Code  12JUN 8 PM 1022 SUFF CODE  eq. Code				
BOKEELIA NAME OF AGENCY:	5	/ ID N	lo. ⊋ QQ				
Pine I S formal NAME OF OFFICE OR POSITION HELD	\		f. Code				
You are not limited to the space on the lines		- <del>- H</del>					
CHECK ONLY IF CANDIDATE O	NEW EMPLOYEE OR AF	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, 2011		'AX YEAR IF OTHER 1	THAN THE CALE	NDAR 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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one):							
COMPARATIVE (PERCENTAGE) TO PART A PRIMARY SOURCES OF INCO			LLAR VALUE TH				
NAME OF SOURCE	you must write "none" or "n/a") SOUF			SCRIPTION OF THE SOURCE'S			
HONG Excavating To	addr ac 7015 Howald	19 - 1400		EXCAUATING			
Coastal Harbor Chart	-, <del>-</del>		-714	shina Guide			
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF BUSINESS ENTITY	IAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRES OF SOUR		PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
DADT C. DEAL DRODERTY II and built							
PART C REAL PROPERTY [Land, build (If you have nothing to report,		When	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.				
7015 Howard R	bad Boreelia,	R 3390	INST	RUCTIONS on who must s form and how to fill it out on page 3.			
				ER FORMS you may need are described on page 6.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
PART E — LIABILITIES [Major debts - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF CREDITOR		ADDRESS OF CREDITOR					
					12JI		
	<del></del>	, <u>-</u>	* ************************************	. <u> </u>	12JUN 8		
					<b>1</b> (		
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5]  (If you have nothing to report, you must write "none" or "n/a")  BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3							
NAME OF BUSINESS ENTITY		<del></del>			E ()		
ADDRESS OF BUSINESS ENTITY					71		
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 ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required):  DATE SIGNED (required):							
Kammet from 6/8/12					2		
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: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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, star officer, and specified state employee mu file within 30 days of the date of his or h appointment or of the beginning of employment Appointees who must be confirmed by the Sena must file prior to confirmation, even if that is le than 30 days from the date of their appointme

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

Thereafter, local officers/employees, sta officers, and specified state employees a required to file by July 1st following each calend year in which they hold their positions.

Finally, at the end of office or employme each local officer/employee, state officer, a specified state employee is required to file final disclosure form (Form 1F) within 60 da of leaving office or employment. However, fili a CE Form 1F (Final Statement of Finance Interests) does not relieve the filer of filing CE Form 1 if he or she was in their position. December 31, 2011.

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		_					
				$^{\circ}$			
<del></del>				## <u>1</u>			
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	BOSINESS	ENIII T # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY				<u> </u>			
ADDRESS OF BUSINESS ENTITY				<u> </u>			
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS							
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IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
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