

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

LAST NAME — FIRST NAME — MIDDLE NAME:

NAME OF REPORTING PERSON'S AGENCY:

HONC Kenneth Stephen

MAKACHA / PINE ISLAND Fire Commission

MAILING ADDRESS:

CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):

15790 BAHAMA WAY

- LOCAL OFFICER, STATE OFFICER, SPECIFIED STATE EMPLOYEE

BOKELIA, FL. 33922 LEE

LIST OFFICE OR POSITION HELD: Fire Commissioner

CITY: ZIP: COUNTY:

BOTH PARTS OF THIS SECTION MUST BE COMPLETED

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2016 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS NOVEMBER 28th, 2016.

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MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES COMPLEX CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES.

- COMPARATIVE (PERCENTAGE) THRESHOLDS, DOLLAR VALUE THRESHOLDS

FINAL REPORT

PART A -- PRIMARY SOURCES OF INCOME

NAME OF SOURCE OF INCOME, SOURCE'S ADDRESS, DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY

HONC Excavating, LLC, 15790 BAHAMA WAY, BOKELIA, FL, 33922, Grading Contractor

PART B -- SECONDARY SOURCES OF INCOME

(Major customers, clients, and other sources of income to businesses owned by reporting person - See instructions)

NAME OF BUSINESS ENTITY, NAME OF MAJOR SOURCES OF BUSINESS' INCOME, ADDRESS OF SOURCE, PRINCIPAL BUSINESS ACTIVITY OF SOURCE

PART C -- REAL PROPERTY

(If you have nothing to report, write "none" or "n/a")

15790 BAHAMA WAY, BOKELIA, FL, 33922

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 of this packet.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]
 (If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

PART E — LIABILITIES [Major debts - See instructions]
 (If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
DE WISE HOME (Pub. Mtg)	c/o 15790 BAHAMA WAY, FORT LINDA, FL. 33977

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]
 (If you have nothing to report, write "none" or "n/a")

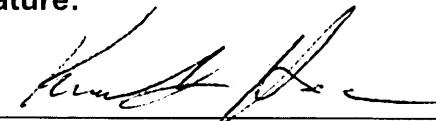
NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2

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IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE OF FILER:

Signature:



Date Signed:

11/01/17

CPA or ATTORNEY SIGNATURE ONLY

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature _____

Date Signed _____

FILING INSTRUCTIONS:

WHAT TO FILE:

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted.

WHEN TO FILE:

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, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

WHERE TO FILE:

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; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303.

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

NOTE:

If you are leaving office or employment during the first half of 2016, you may not have filed Form 1 for 2015. In that case, this is not the last form you will file. Form 1F covers January 1, 2016, through your last day of office or employment. You will be required to file Form 1 for 2015 by July 1, 2016, and risk being fined if you do not file Form 1 by the filing deadline, even if you have already filed the CE Form 1F.

Ken Honc
15790 Bahama Way
Bokeelia, FL. 33922

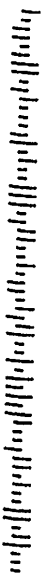
FT MYERS FL 339
NO 244 2007 PM 1 L



Lee County
Supervisor of Elections
PO Box 2545
Fort Myers FL 33902

Final Statement of Financial Interests

33902-254545



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