FADM 1	STATEM	TAT AF	/2011
FORM 1		,	
Please print or type your name, mailing address, agency name, and position belo	w.	INTERESTS	/
LAST NAME FIRST NAME MIDDL	0	FOR OF USE ON	· · · · =
MAILING ADDRESS:	omas leter		VLY:
7200 Coon	Rd		I ID Code
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CITY:	ZIP: COUNTY:		
NAME OF AGENCY:	14ers 33917 1	_ee	ID No.
NAME OF OFFICE OR POSITION HE	Doverolment A	Jihorite	Com. code
			P. Req. Code
You are not limited to the space on the lir	nes on this form. Attach additional sheets	if necessary,	<u> </u>
CHECK ONLY IF CANDIDATE		Ť	2011 PNF Form
	H PARTS OF THIS SECT	ION MUST BE COM	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR F	FINANCIAL INTERESTS FOR THE PR	ECEDING TAX YEAR, WHETH	HER BASED ON A CALENDAR YEAR OR ON
A FISCAL YEAR. PLEASE STATE BEL	OW WHETHER THIS STATEMENT IS	FOR THE PRECEDING TAX Y	'EAR ENDING EITHER (must check one):
DECEMBER 31, 2011 MANNER OF CALCULATING REPORT		TAX YEAR IF OTHER THAN TI	HE CALENDAR YEAK:
MANNER OF CALCULATING REPORT THE LEGISLATURE ALLOWS FILERS REQUIRES FEWER CALCULATIONS	S THE OPTION OF USING REPORT	TING THRESHOLDS THAT A	RE ABSOLUTE DOLLAR VALUES, WHICH Y BASED ON PERCENTAGE VALUES (see
instructions for further details). PLEASE	E STATE BELOW WHETHER THIS STA	ATEMENT REFLECTS EITHER	,
COMPARATIVE (PERCENTAGE PART A PRIMARY SOURCES OF IN			ALUE THRESHOLDS
	NCOME [Major sources of income to tr port, you must write "none" or "n/a")		ictions p. 4]
NAME OF SOURCE OF INCOME	1		
		RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Tommy Hoolihan			
Tommy Hoolings Real Estate +			
Tommy Hoolings Real Estate + Lifestyle Center	2787 ADD Aorth For		
Rewl Estate + LiFestyle Centr	2787 North For	ianiani Tr T Myers Fl.	
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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	1	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
Common STOCK	STone	Stonegate Bank					
		7					
PART E — LIABILITIES [Major debts - See instructions (If you have nothing to report, you must w		/a")					
NAME OF CREDITOR		ADDRESS OF CI	REDITOR				
SUNTRUST Bank	ATIGNTA GA.						
Montgomery Bank	Sities Mo.						
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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")							
	SENTITY#1	BUSINESS ENTITY # 2	BUSINESS ENTITY #3 00				
NAME OF BUSINESS ENTITY RIVER DE	golf cour		77 90 1				
ADDRESS OF BUSINESS ENTITY 6270 Riv	_		EL				
PRINCIPAL BUSINESS ACTIVITY ON FCOURS			8				
POSITION HELD WITH ENTITY Preside			T ₁				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS							
NATURE OF MY OWNERSHIP INTEREST	operato.						
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							

SIGNATURE (required):

DATE SIGNED (required):

September 23, 2012

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.

FILING INSTRUCTIONS:

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, 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, filling 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, 2011.

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