FORM 1	STATEM	IENT OF		<i>2</i> 012	
Please print or type your name, mailing address, agency name, and position be	FINANCIAI	INTERESTS		FOR OFFICE USE ONLY:	
LAST NAME - FIRST NAME - MIDE	Ω				
MAILING ADDRESS:	oings P.				
7200 Coon (2 <i>0</i>				
CITY:	Yers 33917 COUNTY:	Ler		133	
NAME OF AGENCY:	Development A	Thor. Ty	\	3SEPOZMO453SDE LEE	
NAME OF OFFICE OR POSITION H	ELD OR SOUGHT :				
You are not limited to the space on the	lines on this form. Attach additional sheet	if peeperon.			
CHECK ONLY IF CANDIDATE					
	TH PARTS OF THIS SECT	ION MUST BE COM	PLET	ED ****	
	JR FINANCIAL INTERESTS FOR TH				
YEAR OR ON A FISCAL YEAR. PL EITHER (must check one):	EASE STATE BELOW WHETHER TI	IIS STATEMENT IS FOR THE	PRECE	DING TAX YEAR ENDING	
DECEMBER 31, 2	012 <u>OR</u> SPECIFY	TAX YEAR IF OTHER THAN	THE CA	LENDAR YEAR:	
REQUIRES FEWER CALCULATION	ORTABLE INTERESTS: RS THE OPTION OF USING REPOR IS, OR USING COMPARATIVE THRI CHECK THE ONE YOU ARE USING	ESHOLDS, WHICH ARE USU			
	PERCENTAGE) THRESHOLDS		VALUE	THRESHOLDS	
	INCOME [Major sources of income to a		ctions]		
NAME OF SOURCE OF INCOME	• · · · · · · · · · · · · · · · · · · ·	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Towns Hoolihe		2787 1 Taniani Tr		Real Estate	
Real Estate + O. FT Myers F1.3			Bo	Keragy	
LifesTyle cente	"		·	<i>-</i>	
	OF INCOME and other sources of income to busines eport, write "none" or "n/a")	ses owned by the reporting per	son - See	instructions}	
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
Vision one	commissions	2787 n. Tahiani		Realestate	
Realty Group		TV: N. FT. M	yers		
Riverbend Golfrous				CholFcource	
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")			when	G INSTRUCTIONS for and where to file this	
See a Tlack	red FrhibiT Y	} ,	form of pag	are located at the bottom ge 2.	
				RUCTIONS on who must is form and how to fill it egin on page 3.	

PART D — INTANGIBLE PERSONAL PROPERTY (If you have nothing to report, you mu	[Stocks, bonds, certificates of deposit, etc See instructions] ust write "none" or "n/a")							
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
common STock	Stonegate Bank							
	8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
PART E — LIABILITIES [Major debts - See instruct (If you have nothing to report, you mu	tions] ust write "none" or "n/a")							
NAME OF CREDITOR	ADDRESS OF CREDITOR							
Montgomery Bank	Sikes Mo.							
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 # 3								
NAME OF BUSINESS ENTITY Querb	end go i f court e							
	ver club et.							
	usse/Liquor Sales							
POSITION HELD WITH ENTITY Press	, <i>i</i> [*] 1							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS								
NATURE OF MY OWNERSHIP INTEREST	operator							
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE								
SIGNATURE (required): DATE SIGNED (required):								
ZPM ZPWW AUGUST 30, 2013								
F	LING INSTRUCTIONS: AUGUST 30, 2013							
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 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. 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							
If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).	Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not							
NOTE: MULTIPLE FILING UNNECESSARY:	Supervisor of the county where your agency has its headquarters.) Candidates for publicly-elected local office must file at the same time they file their							
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	State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709. qualifying papers. Thereafter, local officers/employees, state employees officers, and specified state employees							
Form 1 because of another public position must at least file a copy of his or her original	Candidates file this form together with their qualifying papers. are required to file by July 1st following each calendar year in which they hold their positions.							
Form 1 when qualifying.	To determine what category your position falls under, see the "Who Must File" Instructions on page 3. Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a							
	Facsimiles will not be accepted. 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.							

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