FORM 1	STATEM	IENT OF		2012	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	$S \int$	FOR OFFICE USE ONLY:	
LAST NAME - FIRST NAME - MIDDLE YOWARD KETTY	NAME: JUEN				
MAILING ADDRESS: 41 JW 5300 TER				/	
CITY:	ZIP: COUNTY:				
I	39,4 LEE				
NAME OF OFFICE OR POSITION HELD	OR SOUGHT:		1	3.71UL25AM0938 STE LEE	
PERVITY DINGSTOR You are not limited to the space on the lines	1200	/ <i>ひ</i> 〉 , If necessary.	÷	32 32 33	
CHECK ONLY IF CANDIDATE C				H	
**** 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 SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS:					
THE LEGISLATURE ALLOWS FILERS TO REQUIRES FEWER CALCULATIONS, (see instructions for further details). CH	THE OPTION OF USING REPORT OR USING COMPARATIVE THRE ECK THE ONE YOU ARE USING:	SHOLDS, WHICH ARE USU	JALLY BA	SED ON PERCENTAGE VALUES	
PART A PRIMARY SOURCES OF INC				THRESHOLDS	
(If you have nothing to repor NAME OF SOURCE	t, you must write "none" or "n/a")		_	SCRIPTION OF THE SOURCE'S	
OF INCOME	SOURCE'S ADDRESS		PR	INCIPAL BUSINESS ACTIVITY	
FENT BOCK	737 Marsum ST	FT Mysen, PL 33913	ZEN	TAL PROPERTY	
	DI- MARCICAIS	(1719001-3711)		11401.5-1	
PART B SECONDARY SOURCES OF [Major customers, clients, and (If you have nothing to report	other sources of income to business	ses owned by the reporting per	rson - See	instructions]	
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					
Sixue Family Terrococe, BIZ Marcara ST F+ Myors FL 33917				are located at the bottom	
			file th	CUCTIONS on who must is form and how to fill it egin 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 INTANGIBLE	Ţ	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
Nove						
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, you must write "none" or "n/a")						
NAME OF CREDITOR	1	ADDRESS OF CREDITOR				
DEWEN	PO Buz	PO BXZ4738 (1) PALL BEALLY FL 33416				
Quician		1050 WOODWED AVE DETROIT MI UNTIL				
		Supplied the period of the supplied of the sup				
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")						
BUSI	NESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY #3			
NAME OF BUSINESS ENTITY						
ADDRESS OF BUSINESS ENTITY			<u>l </u>			
PRINCIPAL BUSINESS ACTIVITY			43			
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):						
		7/24/13				
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.

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

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 ČE 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.

Howard Br. Gree Bear Ft 35914

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