FORM 1	STATEM	2008			
Please print or type your name, mailing address, agency name, and position below	FINANCIAL	INTERESTS			
MAILING ADDRESS	ervation Stree	FOR OFFI USE ONLY	· 93		
CITY: Bonita Spring NAME OF AGENCY: Collier NAME OF OFFICE OR POSITION HEL You are not limited to the space on the lim	ZIP: COUNTY: 34135 COUNTY School BOA DOR SOUGHT: Principal, (LEE <u>rd</u> Gulfview Middle If necessary.	ID Code		
"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 (check one): DECEMBER 31, 2008 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS: SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: 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 (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS OR MOLLAR VALUE THRESHOLDS					
PART A PRIMARY SOURCES OF IN NAME OF SOURCE OF INCOME	SOU	ne reporting person] RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
Dist School Board of Col	live Caupry 5775 0580		Salary FOR being Principal		
		· · · · · · · · · · · · · · · · · · ·			
			······································		
PART B - SECONDARY SOURCES O NAME OF BUSINESS ENTITY 130 Maravista	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
130 Marwoista	Kintal foperty	130 Moravist A Eau Folmonth MA 525	77		
2011 6 10 21	Richel Persentin				
3011 Sandpiper	Naving 1 110 part of	30x Sandpiper bay Naples, 62 341	102		
130 Maravista Ave	- Falmath, MASSac	n] Primary Residance Suscts- Rental Pines	FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin		
3011 Sand piper bay	Circle Naples FL 34	162 - Kental Koyur	on page 3. OTHER FORMS you may need to file are described on page 6.		

PART D INTANGIBLE PERSONAL PROPERTY [TYPE OF INTANGIBLE	Stocks, bonds, certifica	ates of deposit, etc.] BUSINESS ENTITY TO WHI	ICH THE PROPERTY RELATES		
/ /					
*///					
	_ +	<u></u>			
/ / · ·					
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	1	ADDRESS OF CREDITOR			
SUNCOAST Schools Federal Co	edit Union	47 Union POBOX 11904 TAMPA, FL 33680-1904			
Home Comings Financia 1	PO BO	PO BOX 79135 Phoenix, AZ 85062-9135			
Sun Trust Mortgase	P.O. E	P.O. Box 79041 Baltimore, MD 21279-0041			
PART F — INTERESTS IN SPECIFIED BUSINESSES	[Ownership or positio	ons in certain types of businesses	3]		
BUSINESS		BUSINESS ENTITY # 2			
NAME OF BUSINESS ENTITY	1				
ADDRESS OF BUSINESS ENTITY	11	·			
PRINCIPAL BUSINESS	///	<u> </u>			
POSITION HELD WITH ENTITY	1-1	• <u> </u>			
I OWN MORE THAN A 5%	/				
	<u></u>				
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE (required): June 16,2009					
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	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 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 employ- ment. Appointees who must be confirmed by				
section, you must write "none" or "n/a" in that section(s).	of Elections of the connently reside. (If you	ounty in which they perma- u do not permanently reside	the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.		

Facsimiles will not be accepted.

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 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.

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.

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