					2004
FORM 1		STATEM	ENT OF		2004 / 2005
Please print or type your name, mailing address, agency name, and position belo	w:	FINANCIAL	INTERESTS		SUPE
LAST NAME - FIRST NAME MIDDL Inge, Ronald E. MAILING ADDRESS : 5571 Halifax Avenue	E NAME	· · · · · · · · · · · · · · · · · · ·	FOR OF USE OF		RECEIVED 2004 JAN -4 PH 12: 27 SUPERVISUR OF ELECTIONS
Fort Myers	3391 ZIP :				ode PH12: 27
NAME OF AGENCY : Lee Co. Local Plannir NAME OF OFFICE OR POSITION HE Member			ting Adhoc Cute.		o. <b>2 -</b> Code eq. Code
	XN		TEE		PDF 2003
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BE DECEMBER 31, 2( MANNER OF CALCULATING REPOR THE LEGISLATURE ALLOWS FILEF REQUIRES FEWER CALCULATIONS instructions for further details). PLEAS COMPARATIVE (PERCENTAGE PART A PRIMARY SOURCES OF I NAME OF SOURCE	LOW WH 004 RES THE 5, OR US E STATE E) THRE	IETHER THIS STATEMENT IS OR SPECIFY NTERESTS: OPTION OF USING REPOR ING COMPARATIVE THRES BELOW WHETHER THIS ST SHOLDS [Major sources of income to th SOU	FOR THE PRECEDING TAX	YEAR EN THE CALE ARE ABS LY BASE R (check o DOLLAR DOLLAR	DING EITHER (check one): ENDAR YEAR: OLUTE DOLLAR VALUES, WHICH D ON PERCENTAGE VALUES (see one): VALUE THRESHOLDS SCRIPTION OF THE SOURCE'S
Inge & Associates	OF INCOME ADDRESS			PRINCIPAL BUSINESS ACTIVITY   2 Investments - Consulting	
Land Solutions, Inc.		6150 Diamond Cent FM, FL 33912	tre Court #1300		Estate Consulting Development
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY	NAM	ME [Major customers, clients, E OF MAJOR SOURCES BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	) business	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE
Inge & Associates	Inge & Associates Harper / McNew 557		5571 Halifax Aver	nue	Investments
			FM, FL 33912		
PART C REAL PROPERTY [Land, SEE ATTACHED SCHEDULE		owned by the reporting perso	n]	and w ed at t INST this fo	IG INSTRUCTIONS for when here to file this form are locat- the bottom of page 2. RUCTIONS on who must file orm and how to fill it out begin
		· · · · · · · · · · · · · · · · · · ·			ge 3. ER FORMS you may need to e described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE   BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				E PROPERTY RELATES
Stock Investment and Debit		Bank of	America	
Account				· · · · · · · · · · · · · · · · · · ·
				· · · · · · · · · · · · · · · · · · ·
			· · ·	SU 20
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PART E — LIABILITIES [Major NAME OF CRE			ADDRESS OF CRE	
None				<u> </u>
				5 <u>2</u>
				δ.
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]				
SEE ATTACHED	BUSINESS ENTI		BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	Inge Properties, Inc. 5571 Halifax Avenue Fort Myers, FL 33912		Sumcarlos, Inc. / Sumcarlos Ltd.	Inge & Associates, Inc. 5571 Halifax Avenue
ADDRESS OF BUSINESS ENTITY			5571 Halifax Avenue Fort Myers, FL 33912	Fort Myers, FL 33912
PRINCIPAL BUSINESS ACTIVITY	Real Estate Rental		Real Estate Rental	Consulting
POSITION HELD WITH ENTITY	President		Secretary / Treasurer	President
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes		Yes	Yes
NATURE OF MY OWNERSHIP INTEREST	50% of Stock		10% of Stock and Partnership	50% of Stock
IF ANY OF PARTS A THROUGH FARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE 🕱				

#### SIGNATURE (required):

DATE SIGNED (required):

15/04

#### 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.

## 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.

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.

### 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.

### STATEMENT OF FINANCIAL INTERESTS

#### Page 2

#### PART C -- REAL PROPERTY

- \* Lot 4, Central Metro Medical Center, PB 45, PG 83.
- \* 1.6 acres Pine Island Road, Block 3613, Cape Coral Unit 49, Plat Book 17, Pages 145-154.
- \* San Carlos Retail Shops, 15900 Summerlin Road and 16970 San Carlos Boulevard, Fort Myers, FL (part owner).
- \* Parcel 50, Unit 71 and Parcel 50, Unit 73, Mirror Lakes, Sections 19 and 20, Township 45S, Range 27E, Plat Book 27, Pages 158 through 160 (part owner).

#### PART F -- INTERESTS IN SPECIFIED BUSINESSES (continued)

Name of business entity:	S.W. Florida Land Ten, LLC		
Address of business entity:	6150 Diamond Centre Court #13 Fort Myers, FL 33912	300	
Principal business activity:	Real Estate Investment		
Position held with entity:	Managing Member	<b>20</b> SUP	
I own more than 5% interest:	Yes	2004 JAN	R
Nature of my ownership interest:	1/3 Interest	2004 JAN -4 SUPERVISOR OF	S
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FORM 1X	RM 1X AMENDMENT TO FORM 1					
STATEMENT OF FINANCIAL INTERESTS						
LAST NAME - FIRST NAME - MIDDL	E NAME (	same as on original Form 1):			ORM 1 (Statement of Financial	
Inge Ronald E.			Interests) I FILED FOR THE YEAR: 2004			
MAILING ADDRESS: 5571 Halifax Avenue				,	OR WAS A CANDIDATE FOR, THE	
				POSITION OF: LEE CO. Local Planning Agency		
Fort Myers, FL 3391				GENCY:		
CITY: ZIP:		COUNTY:	Lee County Florida			
MANNER OF CALCULATING REPO						
PRIOR TO 2001, THE THRESHOLDS UES. BEGINNING IN 2001, THE LEC DOLLAR VALUES (see instructions for	SISLATUR	RE ALLOWED FILERS THE OF	PTION OF USING REPORTING	G THRES	HOLDS THAT ARE ABSOLUTE	
COMPARATIVE (PER	CENTAGE	E) THRESHOLDS (mandatory f	for filings prior to 2001; elective	e for filings	beginning in 2001)	
OR						
DOLLAR VALUE THR	ESHOLDS	S (elective for filings beginning	in 2001)			
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the NAME OF SOURCE SOURCE OF INCOME ADDRES			CE'S DESCRIPTION OF THE SOURCE'S			
Inge & Associates		5571 Halifax Ave	. FM,FL 33912	Investments - Consultir		
Land Solutions, Inc.		6150 Diamond Cent			Estate Consulting and	
		FM, FL 33912	Development		elopment	
PART B SECONDARY SOURCES	OF INCO	ME (Maior customers, clients, a	and other sources of income to	business	es owned by the reporting person	
NAME OF BUSINESS ENTITY	NAM	E OF MAJOR SOURCES BUSINESS'S INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
Inge & Associates	Harp	er / McNew	5571 Halifax Ave.		Investments	
	£		Fort Myers, FL 3	3912		
PART C REAL PROPERTY [Land, buildings owned by the reporting person]						
Lot 4, Central Metro Medical Center, PB 45, PG 83						
1.6 acres Pine Island Rd. in Block 3613, Cape Coral Unit 49, Plat Book 17, pages 145-154						
San Carlos Retail Sho	ops, 1	5900 Summerlin Rd	. and 16970 San C	arlos	B1vd. FM, FL 33908	
PART D — INTANGIBLE PERSONA TYPE OF INTANGIBI		RTY [Stocks, bonds, certificate	s of deposit, etc.] BUSINESS ENTITY TO WHIC	H THE PI		
Stock Investment and		it Bank of				
Account						
	SUPERVISOR OF ELECTIONS				SUPERVIS	
	500 HON -2 6H 8: 53					
CE FORM 1 X- Eff. 10/2001		(Continued or	n reverse side) しらん	CEIA	PAGE 1	

PART E — LIABILITIES [Major NAME OF CREI		ADDRESS OF CREDITOR				
		, ,				
PART F — INTERESTS IN SPE	CIFIED BUSINESSES [Ownership or po BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY	Inge Properties, Inc. 5571 Halifax Avenue Fort Myers, FL 33912	Sumcarlos, Inc. / Sumcarlos Ltd. 5571 Halifax Avenue Fort Myers, FL 33912	Inge & Associates,Inc. 5571 Halifax Avenue Fort Myers,FL 33912			
PRINCIPAL BUSINESS ACTIVITY	Real Estate Rental	Real Estate Rental	Consulting			
POSITION HELD WITH ENTITY	President	Secretary / Treasurer	President			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes	Yes	Yes			
NATURE OF MY OWNERSHIP INTEREST	50% of Stock	10% of Stock & Partner	ship 50% of Stock			
PART G — EXPLANATION OF CHANGES						
			SUPERVIS			
IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE: DATE SIGNED: 10 10 00						
FILING INSTRUCTIONS:						

#### WHERE TO FILE:

Return the form to the location where you filed the Form 1 that you are seeking to amend.

Local officers should have filed with the Supervisor of Elections of the county in which they permanently resided. (If you did not permanently reside in Florida, then with the Supervisor of the county where your agency had its head-quarters.)

State officers' or specified state employees' forms should be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709.

Candidates should have filed their Form 1

together with their qualifying papers.

#### QUESTIONS:

About this form or the ethics laws may be addressed to the Commission on Ethics, Post Office Drawer 15709, Tallahassee, Florida 32317-5709; telephone (850) 488-7864 (Suncom 278-7864).

# **INSTRUCTIONS FOR COMPLETING FORM 1 X:**

#### INTRODUCTORY INFORMATION (At Top of Form):

NAME, DISCLOSURE PERIOD, NAME OF POSITION, and NAME OF AGENCY: Use the same information as on the original Form 1 you are seeking to amend.

MAILING ADDRESS: Use your current mailing address.

MANNER OF CALCULATING REPORTABLE INTERESTS: Check the box that corresponds to the type of thresholds you used for the original Form 1 you are seeking to amend.

## PARTS A through F:

Use these sections of the form to report the new information you believe should have been reported on your original Form 1, continuing on a separate sheet if necessary. Additional instructions are found on pages 3-5, attached.

## PART G:

Use this section of the form to explain the changes you are making in your original Form 1.

Development Solutions, LLC



October 28, 2004

Ms. Patricia Kathy Geren Administrative Specialist County of Lee Department of Public Resources 2115 Second Street Fort Myers, FL 33901

## RE: FORM 1X

Dear Kathy:

Enclosed you will find Form 1X, to update your records showing me as a member of the Blasting Ad-Hoc Committee. All other information is the same as previously recorded.

If you need anything additional, just let me know. Thanks.

Sincerely

Ronald E. Inge President

REI:jps Enclosure

Ron Inge \ Blasting issues \ P. K. Geren letter 10-28-04