FORM 1	STATEM	ENT OF		2006	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	5		
LAST NAME FIRST NAME MIDDLE N. KECHAN CONSTAINCE MAILING ADDRESS:	c - John	FOR OUSE O			
Cape Coral 3:	CINCE SII4 Lee ZIP: COUNTY:		ID Code		
NAME OF AGENCY: Sports Developme NAME OF OFFICE OR POSITION HELD O	nt employee		Conf. Co		
You are not limited to the space on the lines of CHECK ONLY IF CANDIDATE OR	<u></u>	·			
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINA A FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2006 MANNER OF CALCULATING REPORTABLE THE LEGISLATURE ALLOWS FILERS THE REQUIRES FEWER CALCULATIONS, OR instructions for further details). PLEASE STATE COMPARATIVE (PERCENTAGE) THE	WHETHER THIS STATEMENT IS OR SPECIFY I LE INTERESTS: HE OPTION OF USING REPORT USING COMPARATIVE THRESH ATE BELOW WHETHER THIS STA	ECEDING TAX YEAR, WHETH FOR THE PRECEDING TAX Y TAX YEAR IF OTHER THAN T TING THRESHOLDS THAT A HOLDS, WHICH ARE USUALL ATEMENT REFLECTS EITHER	HER BASED O YEAR ENDING THE CALENDA ARE ABSOLUT LY BASED ON R (check one):	GEITHER (check one): AR YEAR: TE DOLLAR VALUES, WHICH	
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME	SOUF	ne reporting person] RCE'S RESS		IPTION OF THE SOURCE'S IPAL BUSINESS ACTIVITY	
	parent 275 Bicacli			Sperts Development	
PART B SECONDARY SOURCES OF IN NAME OF N BUSINESS ENTITY	NCOME [Major customers, clients, a IAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE) businesses o	wned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
Passion Parties by Conn	vić	Z	3312 SW Brattvenue In home profit sales		
		Cope Corat, i C	D119 -		
PART C REAL PROPERTY [Land, buildings owned by the reporting person]			and where	INSTRUCTIONS for when to file this form are locations of page 2.	
Presidential hard 13312 SW 3nd Avenue Cape Coral, FC 33914				INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.	
			OTHER I	FORMS you may need to	

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
1RA Rollwer Investmen	ts Previous	Previous Holk through previous employers			
POP Investments	lee Coa	Lee County Boce/ Sports Development			
		, , , , , , , , , , , , , , , , , , , ,			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR			
Chase Manhatten Mat. Carp	PO Box	DO Box 9001871, LOUISVILLE, KY 240240-1871			
Pamela Peters - 2nd Most	ange 9271 Br				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]					
	NESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY					
ADDRESS OF BUSINESS ENTITY					
PRINCIPAL BUSINESS ACTIVITY					
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): Childance J. Klenan DATE SIGNED (required): 5/21/07					
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).

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 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.

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.

CE FORM 1 - Eff. 1/2007