FORM 1 STATEMENT OF						2003				
Please print or type your name, mailing address, agency name, and position be	ow:	FINANCIAL	INTERF	ESTS	Γ					
Address, agency name, and position below: LAST NAME FIRST NAME MIDDLE NAME : <u>KINSEY JR., JAMES E.</u> MAILING ADDRESS : PO BOX 1662					FOR OFFICE USE ONLY: ID Code ID No.					
CITY: <u>FT MYERS FL 3</u> NAME OF AGENCY: <u>CITY OF FT MYERS</u> NAME OF OFFICE OR POSITION HI LOCAL OFFICER		ID Code ID/No. Conf. Code P. Req. Code								
CHECK IF CANDIDATE OR DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUF A FISCAL YEAR. PLEASE STATE BE			ST BE COMPLETED	R, WHETH				OR ON		
DECEMBER 31, 20 MANNER OF CALCULATING REPO THE LEGISLATURE ALLOWS FILE REQUIRES FEWER CALCULATION instructions for further details). PLEA COMPARATIVE (PERCENTAG	RTABLE I RS THE 5, OR US SE STATE	NTERESTS: OPTION OF USING REPOR ING COMPARATIVE THRES BELOW WHETHER THIS ST	HOLDS, WHICH AR ATEMENT REFLECT	S THAT AI E USUALL TS EITHER	RE ABS Y BASE (check	OLUTE DOLI	.ar values, Entage valu	WHICH		
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person NAME OF SOURCE SOURCE'S OF INCOME ADDRESS					DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY					
KINSEY ASSOCIATES,	INC.				REAL	ESTATE	BROKER	AGE		
STARBOARD DEVELOPME	SUITE 1 FT MYERS FL 339 CARBOARD DEVELOPMENT CORP. SAME AS ABOVE			REAL ESTATE DEVELOPMENT						
			and other sources of ADDR OF SOL	RESS		PRINCIPAL BUSINESS ACTIVITY OF SOURCE				
				T			ŀ			
PART C REAL PROPERTY [Land,	buildings	owned by the reporting persor	n] 		and w ed at i	here to file to the bottom of RUCTION form and how	JCTIONS form are of page 2. S on who mu to fill it out	locat- ist file		
					отні	-	S you may ne on page 6.	eed to		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE I BUSINESS ENTITY TO WHICH THE PROPERTY RELATES									
			<u></u>						
		-	<u></u>						
					· · · · · · · · · · · · · · · · · · ·				
			<u></u>						
	·								
PART E — LIABILITIES [Major NAME OF CREI		Į	ADDRESS OF CREDITOR						
	<u></u>								
				<u></u>					
				<u></u>					
			<b></b>	<u> </u>					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]									
	BUSINESS EI		BUSINESS ENTITY # 2	-	BUSINESS ENTITY # 3				
NAME OF BUSINESS ENTITY	GRD ASSOCI	ATES LLC							
ADDRESS OF BUSINESS ENTITY	PO BOX 166								
PRINCIPAL BUSINESS ACTIVITY	SELL OR DE								
POSITION HELD WITH ENTITY	MANAGER								
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	16% OWNERS	HIP		· · · · · · · · · · · · · · · · · · ·					
NATURE OF MY OWNERSHIP INTEREST	INVESTMENT								
			D ON A SEPARATE SHE						
IF ANT UF FARIS			UNA SEPARATE SILL	= I, F LL					
SIGNATURE (required):		/KY	DATE SI	GNED (r	required):				
JAMES E. KINSE		pu fur		8/04					
	Ť	ILING DE	<b>STRUCTIONS:</b>						
WHAT TO FILE:		WHERE TO FIL			IN TO FILE:				
signing and dating it, send back only the first on		on Ethics or a Cou	the form by the Commission unty Supervisor of Elections	Initially, each local officer/employee, state officer, and specified state employee must file within 20 days of the date of his or har					
		for your annual disc to that location.	closure filing, return the form	appoir	within 30 days of the date of his or her appointment or of the beginning of employ-				
of ne NOTE: in			loyees file with the Supervisor county in which they perma-	the Se	ment. Appointees who must be confirmed by the Senate must file prior to confirmation, even				
		nently reside. (If you	ou do not permanently reside		is less than 30 days from the date of pointment.				
			the Supervisor of the county has its headquarters.)		idates for publicly-elected local office				
			specified state employees ssion on Ethics, P.O. Drawer	must file at the same time they file their qualifying papers.					
		15709, Tallahassee,		Thereafter, local officers/employees, state					

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.

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.

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.