	229-8612					
FORM 1	STATEMENT OF			F		2004
Please print or type your name, mailing address, agency name, and position bel		NCIAL	INTER	ESTS		
LAST NAME FIRST NAME MIDD Landress, John, T MAILING ADDRESS :	88124			FOR OF USE OF		TIO
Centex Homes			<u> </u>			
5801 Pelican Bay Boule				7.	10	
CITY : Naples	zip : 34108	COUNTY : COLLIE	R			A ROAD
NAME OF AGENCY : Arboxrwood CDD, Quar	rv CDD				Conf.	
NAME OF OFFICE OR POSITION HE Supervisor				\neg	P. Rec	1. Code
	OR 🗋 NEW I	EMPLOYEE OR AF	PPOINTEE			
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BE DECEMBER 31, 200 MANNER OF CALCULATING REPOR THE LEGISLATURE ALLOWS FILE REQUIRES FEWER CALCULATIONS instructions for further details). PLEAS	ELOW WHETHER THI D4 <u>OR</u> RTABLE INTERESTS RS THE OPTION OF S, OR USING COMP	IS STATEMENT IS SPECIFY : F USING REPOR ARATIVE THRESH	FOR THE PREC TAX YEAR IF OT TING THRESHO HOLDS, WHICH	CEDING TAX THER THAN T DLDS THAT A ARE USUAL	YEAR END THE CALEN ARE ABSO LY BASED	NDAR YEAR: NDAR YEAR: DUTE DOLLAR VALUES, WHICH ON PERCENTAGE VALUES (see
			<u>OR</u>		DOLLAR V	ALUE THRESHOLDS
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the report NAME OF SOURCE SOURCE'S OF INCOME ADDRESS			RCE'S	on]		CRIPTION OF THE SOURCE'S
CENTER HOMES COASTAL ENGINEERING	SECI F NODI	5801 Pelican Boy Bivel. Ste 600 Nones FL 34108				
COASTAL ENGINEERING	- 3106 Nor	3106 South Horseshue Drive Noples, FL			Consult	hing Engineering FORM
			<u> </u>			
PART B SECONDARY SOURCES NAME OF	NAME OF MAJO		AD	DRESS	businesse	PRINCIPAL BUSINESS
BUSINESS ENTITY λ/Δ	OF BUSINESS	INCOME		SOURCE		ACTIVITY OF SOURCE
PART C REAL PROPERTY [Land, buildings owned by the reporting person]					and wh	G INSTRUCTIONS for when ere to file this form are locat- ne bottom of page 2.
(N //1			······································		INSTR	RUCTIONS on who must file m and how to fill it out begin
		<u></u>				R FORMS you may need to described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY TYPE OF INTANGIBLE	[Stocks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
AOIK, Fidelity	Centex Homes					
1						
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	ADDRESS OF CREDITOR					
#VS Bank	P.O. Bux 2466, Ushkosh, WF 54903					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
	ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3					
NAME OF BUSINESS ENTITY	4					
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): Show for the signed (required): 6/29/05						
FILING INSTRUCTIONS:						
WHAT TO FILE:	WHERE TO FILE: WHEN 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.	you were mailed the form by the Commission Ethics or a County Supervisor of Elections ryour annual disclosure filing, return the form that location. 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 employ-					
	cal officers/employees file with the Supervisor Elections of the county in which they perma- ntly reside. (If you do not permanently reside Florida, file with the Supervisor of the county iere your agency has its headquarters.) ment. 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					
MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form 1 for a	State officers or specified state employees must file at the same time they file their qualifying papers					
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	The with the Commission on Ethics, P.O. Drawer15709, Tallahassee, FL 32317-5709; physicaladdress: 3600 Maclay Boulevard, South, Suite201, Tallahassee, FL 32312.Thereafter, local officers/employees, stateofficers, and specified state employees arerequired to file by July 1st following each					
of his or her original Form 1 when qualifying.	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.

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.