FORM 1	STATEME	NT OF	2005
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL I	NTERESTS	
	AME: COMAS	FOR OFFIC USE ONLY:	
MAILING ADDRESS: 5454 WHISPERING	- WILLOW WAY		
			ID Code
CITY: FT. MYERS	33908 COUNTY: LE		ID No.
	CDD & QUARRY	COD · ·	Conf. Code
NAME OF OFFICE OR POSITION HELD VICE CHAIRMAN	DR SOUGHT:	PETTVELY	P. Req. Code
CHECK ONLY IF 🗋 CANDIDATE OF		DINTEE	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FIN A FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2005 MANNER OF CALCULATING REPORTAGE THE LEGISLATURE ALLOWS FILERS T REQUIRES FEWER CALCULATIONS, OU instructions for further details). PLEASE S COMPARATIVE (PERCENTAGE) T	V WHETHER THIS STATEMENT IS FO <u>OR</u> SPECIFY TA SLE INTERESTS: THE OPTION OF USING REPORTIN R USING COMPARATIVE THRESHOL TATE BELOW WHETHER THIS STATE	R THE PRECEDING TAX YEA (YEAR IF OTHER THAN THE G THRESHOLDS THAT ARE LDS, WHICH ARE USUALLY E MENT REFLECTS EITHER (cl	R ENDING EITHER (check one): CALENDAR YEAR: ABSOLUTE DOLLAR VALUES, WHICH BASED ON PERCENTAGE VALUES (see
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE	SOURCE	E'S	DESCRIPTION OF THE SOURCE'S
CENTEX HOMES	ADDRES 5801 Pelican Bay	QUID CHI	OME BUILDER
	NAples, FLA. 341	08 600,	
PART B SECONDARY SOURCES OF I NAME OF BUSINESS ENTITY	NCOME [Major customers, clients, and NAME OF MAJOR SOURCES OF BUSINESS' INCOME	other sources of income to bus ADDRESS OF SOURCE	sinesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE
[			
PART C REAL PROPERTY [Land, build 5454 Whispering Willow		a e II tt	<b>ILING INSTRUCTIONS</b> for when nd where to file this form are locat- d at the bottom of page 2. <b>NSTRUCTIONS</b> on who must file his form and how to fill it out begin n page 3.
		c	THER FORMS you may need to le are 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
AOK	AOIK Ret. Account the Employer - Centex Hours,
	Fordery Fidelity
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	ADDRESS OF CREDITOR
Well'S FSRGE - HOME Mortgay	e POBOX 14411 Des Moines 1A 50306
00	•
Citi Mortgage - Home Mortgue	re Citi Mortgage, Inc. PO Box 6006
<u> </u>	-The Lakes, NV. 88901
PART F INTERESTS IN SPECIFIED BUSINESSES	[Ownership or positions in certain types of businesses]
BUSINESS	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):	Canchess DATE SIGNED (required): 8/20/06
	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. 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 employ- ment Appointees who must be confirmed by
section, you must write "none" or "n/a" in that section(s).	Local officers/employees file with the Supervisor of Elections of the county in which they perma- nently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county
Facsimiles will not be accepted.	where your agency has its headquarters.) Candidates for publicly-elected local office

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.

PAGE 2

must file at the same time they file their

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 posi-

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.

qualifying papers.

tions.

**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.

NOTE:

## **Bernie Feliciano**

From:"Bernie Feliciano" <bfeliciano@leeelections.com>To:"SHIRLEY TAYLOR" <taylor.shirley@leg.state.fl.us>Sent:Wednesday, December 21, 2005 3:59 PMSubject:JOHN LANDRESS 88124

Hi Shirley,

88124 John Landress Arborwood CDD Quarry CDD



Mr. Landress resides in Lee County at 15184 Iona Lakes Drive, Fort Myers FL 33908.

He was listed by the coordinator for the Quarry CDD with a Collier County business address, therefore, he appeared on the Collier County list of filers in 2005.

He will be filing a Form 1F Final Statement of Financial Interest for the Quarry CDD (which is in Collier County), however, he is still on the board of supervisors for <u>Arborwood CDD in</u> Lee County and he still resides in Lee County.

Please change his filing location from Collier to Lee County. Thanks for your help. Bernie

Bernie Feliciano Qualifying Officer Lee County Elections Office P O Box 2545 Fort Myers FL 33902-2545 bfeliciano@leeelections.com 239-533-6304 Direct 239-533-6304 Direct 239-533-6310 Facsimile Visit Our Website At: www.leeelections.com

			FIN
FORM 1 F		FEMENT OF INTERESTS	REPORT 2005
(TO BE FILED WITHIN	60 DAYS OF LEAV	ING PUBLIC OFFIC	E OR EMPLOYMENT)
LAST NAME - FIRST NAME - MIDDLE NAM LANDRESS JOHN THO MAILING ADDRESS: 5454 Whispering W	MAS LILLOW WAY		UNITY DEVELOPMENT DEFICIEN LOWING (see "Who Must File" on page 3): ER I STATE OFFICER
FT. FNYERS, FL. 33 CITY: 2 ZIP: 2	108 LEE COUNTY: J		NHELD: ASSISTANT
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FINANCIAL OFFICE OR EMPLOYMENT DESCRIBED ABC MANNER OF CALCULATING REPORTA	INTERESTS FOR THE PERION INTERESTS FOR THE PERION INTERESTS: TION OF USING REPORTING RATIVE THRESHOLDS, WHI THER THIS STATEMENT REP	OCH · 27 1분 THRESHOLDS THAT ARE ABS CH ARE USUALLY BASED ON FLECTS EITHER (check one):	05 AND THE LAST DATE I HELD THE PUBLIC
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME (ENTEX HOMES	SOUR ADDR 5801 RELIZAN P	CE'S ESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY HOME BUILD FIR
	INCOME [Major customers, c ME OF MAJOR SOURCES IF BUSINESS' INCOME	lients, and other sources of inc ADDRESS OF SOURCE	ome to businesses owned by reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE
· · · · · · · · · · · · · · · · · · ·	Ings owned by the reporting p SOLEMAION OLISE SOLEDESS	erson]	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 on page 3 of this packet. OTHER FORMS you may need to file are described on page 6.

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PART D — INTANGIBLE PERSONAL PRO	PERTY [Stocks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO W	HICH THE PROPERTY RELATES
ADIK ACCOUNT	FIDELITY INVESTA	NENTS -> CENTEX
· ·	HOMES	<u>рини</u> в в е
		FINAL
		REPORT
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	ADDRES:	S OF CREDITOR
NA		
PART F — INTERESTS IN SPECIFIED BUS	SINESSES [Ownership or positions in certain types o	f businesses!
BUSINE	SS ENTITY # 1BUSINESS ENTITY #	
VAME OF BUSINESS ENTITY	¥	
ADDRESS OF BUSINESS ENTITY		
PRINCIPAL BUSINESS		
POSITION HELD		
OWN MORE THAN A 5%		
NATURE OF MY		uni , , , , , , , , , ,
IF ANY OF PARTS A THROUGH	F ARE CONTINUED ON A SEPARATE SHI	EET, PLEASE CHECK HERE
SIGNATURE:	mliess DATE	SIGNED: 12/21/01
phi 1. fe		1921/05
$\Box$ $\circ$		
	FILING INSTRUCTIONS:	
VHAT TO FILE:	WHERE TO FILE:	
After completing all parts of this form on	Local officers: file with the Supervisor of Elections of the county in which you perma-	NOTE:
age 1 and 2 including signing and dating it	nently reside. (If you do not permanently reside	If you are leaving office or employment
end back only the first sheet for filing (you need		during the first half of 2005, you may not
end back only the first sheet for filing (you need	in Florida, file with the Supervisor of the county where your agency has its headquarters.)	have filed Form 1 for 2004. In that case,
nd back only the first sheet for filing (you need of return any of the instruction pages).	in Florida, file with the Supervisor of the county where your agency has its headquarters.) State officers or specified state employ-	have filed Form 1 for 2004. In that case, this is not the last form you will file, even though the Form 1F covers the final portion
and back only the first sheet for filing (you need ot return any of the instruction pages). <b>VHEN TO FILE:</b> At the end of office or employment each cal officer, state officer, and specified state	in Florida, file with the Supervisor of the county where your agency has its headquarters.) State officers or specified state employ- ees: file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709;	have filed Form 1 for 2004. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2004 by
ages 1 and 2, including signing and dating it, end back only the first sheet for filing (you need ot return any of the instruction pages). <b>VHEN TO FILE:</b> At the end of office or employment each ocal officer, state officer, and specified state mployee is required to file a final disclosure orm (Form 1F) within 60 days of leaving office	in Florida, file with the Supervisor of the county where your agency has its headquarters.) State officers or specified state employ- ees: file with the Commission on Ethics, P.O.	have filed Form 1 for 2004. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2004 by July 1 of 2005.
and back only the first sheet for filing (you need ot return any of the instruction pages). <b>VHEN TO FILE:</b> At the end of office or employment each cal officer, state officer, and specified state mployee is required to file a final disclosure rm (Form 1F) within 60 days of leaving office r employment, unless you take another posi-	in Florida, file with the Supervisor of the county where your agency has its headquarters.) State officers or specified state employ- ees: file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Sutie 201, Tallahassee, FL 32312. To determine what category your position	have filed Form 1 for 2004. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2004 by July 1 of 2005
and back only the first sheet for filing (you need ot return any of the instruction pages). <b>VHEN TO FILE:</b> At the end of office or employment each cal officer, state officer, and specified state mployee is required to file a final disclosure vrm (Form 1F) within 60 days of leaving office	in Florida, file with the Supervisor of the county where your agency has its headquarters.) State officers or specified state employ- ees: file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Sutie 201, Tallahassee, FL 32312.	have filed Form 1 for 2004. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2004 by
At the end of office or employment each cal officer, state officer, and specified state mployee is required to file a final disclosure rm (Form 1F) within 60 days of leaving office or employment, unless you take another position within the 60-day period that requires you file financial disclosure on Form 1 or Form	in Florida, file with the Supervisor of the county where your agency has its headquarters.) State officers or specified state employ- ees: file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Sutie 201, Tallahassee, FL 32312. To determine what category your position falls under, see the "Who Must File" Instructions	have filed Form 1 for 2004. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2004 by July 1 of 2005

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FORM 1 F	FINAL STAT	<b>FEMENT OI</b>	<b>2005</b>
	FINANCIAL	INTERESTS	5
(TO BE FILED WITHIN	N 60 DAYS OF LEAV	ING PUBLIC OFFI	CE OR EMPLOYMENT)
LAST NAME - FIRST NAME - MIDDLE NAM LANDRESS JOHN TO MAILING ADDRESS: 5801 PELICAN BAY Naples, FL. 34 CITY: Syst Whistenny Willow Way/L FE-Myers, FL. 33908	HE: NUMAS BLUD. Address Address Address HOB COLLIEIZ COUNTY: HOME Ree COUNTY: HOME SODRESS	CHECK <u>ONE</u> OF THE FO	MMUNITY DEVELOMENT Dis LLOWING (see "Who Must File" on page 3): CER I STATE OFFICER STATE EMPLOYEE ON HELD: ASSISTANT
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FINANCIAL OFFICE OR EMPLOYMENT DESCRIBED ABC MANNER OF CALCULATING REPORTA THE LEGISLATURE ALLOWS FILERS THE OP	DVE, WHICH DATE WAS BLE INTERESTS: TION OF USING REPORTING <sup>-</sup> RATIVE THRESHOLDS, WHIC THER THIS STATEMENT REF	DD BETWEEN JANUARY 1, 2 クレチ・27 丁基 THRESHOLDS THAT ARE AB CH ARE USUALLY BASED C LECTS EITHER (check one):	2005 AND THE LAST DATE I HELD THE PUBLIC , 2005. (Date must be prior to 12/31/05) SOLUTE DOLLAR VALUES, WHICH REQUIRES
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME CENTEX HUMES	DME [Major sources of income SOURC ADDRE 5801 PFLICAN SUITE 600 34108	CE'S ESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY HUME BUILDER
			22 22 25 5 5 5
	NCOME [Major customers, cli E OF MAJOR SOURCES F BUSINESS' INCOME	ents, and other sources of inc ADDRESS OF SOURCE	come to businesses owned by reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART C REAL PROPERTY [Land, buildi	ngs owned by the reporting per	rson]	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 on page 3 of this packet. OTHER FORMS you may need to file are described on page 6.

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PART D INTANGIBLE PERSO		Stocks, bonds, o		ICH THE PROPERTY RELATES	
	OUNT	FIDE		MENTS - CENTEX	
<i></i>		HOME			
		( white	2		
······································					
PART E - LIABILITIES [Major d					
			ADDRESS	OF CREDITOR	
N/N					
				······································	
				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
				2005	
		the state of the s			
PART F INTERESTS IN SPEC		S (Ownership	or positions in certain types of	[businesses]	
	BUSINESS ENTI		BUSINESS ENTITY #	n1	
NAME OF BUSINESS ENTITY	NA				
ADDRESS OF BUSINESS ENTITY				i i i i i i i i i i i i i i i i i i i	
PRINCIPAL BUSINESS				5	
ACTIVITY POSITION HELD					
OWN MORE THAN A 5%			<u></u>		
NATURE OF MY					
OWNERSHIP INTEREST					
IF ANY OF PARTS A T	HROUGH F ARE	CONTINUE	ON A SEPARATE SHE	ET, PLEASE CHECK HERE	
SIGNATURE:	P		DATE S	signed: 12/21/05	
	FIL	ING INS	TRUCTIONS:		
WHAT TO FILE: After completing all parts of thi pages 1 and 2, including signing and send back only the first sheet for filing not return any of the instruction pages	s form on <b>L</b> u d dating it, Electi (you need nently ). in Flo	ons of the cou reside. (If you rida, file with th	: ile with the Supervisor of inty in which you perma- do not permanently reside e Supervisor of the county as its headquarters.)	NOTE: If you are leaving office or employ during the first half of 2005, you ma have filed Form 1 for 2004. In that this is not the last form you will file	y not case,

## WHEN TO FILE:

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless you take another position within the 60-day period that requires you to file financial disclosure on Form 1 or Form 6.

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, Sutie 201, Tallahassee, FL 32312.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2004 by July 1 of 2005.

Supervisor of Elections Collier County Jennifer J. Edwards 3301 Tamiami Trl E. Bldg. C 2 Naples, Fl 34112 Phone: 239-774-8450 Fax: 239-774-9468



То:	Committee on Ethics and Elections Attention: Shirley Taylor Program Director	From:	Darlene Lowe
			(Financial Disclosure Custodian)
Fax:	850-488-9657	Date:	11/30/2005
Phone:	850-488-7864	Pages:	3
REF.	John Landress		

•Comments: Mr. John Landress lives in Lee County. However he sent his Form 1 F to Collier County. I am forward the Form 1 F to Lee County. Our office had sent an earlier E-mail about Mr. Landress address being in Lee County.

**Darlene Lowe** 

19492 O7EE4 19492 02EEH 5 GDS X L S S S S S Origin Waybill Number 43370264641 HAA JCJC K 1 800 Call-DHL Ground EXPRESS 43370264641 Billing Reference (will appear on invoice) Bill to: Receiver 3rd Party Special Instructions Advance Weight (LBS) Payment Proter themes LAND Dr. Proceed for the Proceed for the Manual Process 23713 Will John Landress 339 × 5582 Will Collier Co. Electous PALIZABION 3301 E. TAMIANI Trail. Jennifer J. Edwards FROM PACKAGE LABEL 1291 (03/04) S-76

FORM 1	STATEMI	ENT OF	2004
Please print or type your name, mailing address, agency name, and position belo	FINANCIAL	INTERESTS	
LAST NAME FIRST NAME - MIDDL		FOR OFF	
Landress, John, T MAILING ADDRESS :	88124	USE ONL	Y:
Centex Homes			
5801 Pelican Bay Boulev	vard Str (200	K	- D Obde
CITY : Naples	ZIP: COUNTY: 34108 COLLIEF		
NAME OF AGENCY :			
Arbok/wood CDD, Quarr	-		Conf. Code
NAME OF OFFICE OR POSITION HE Supervisor			P Req. Code
	OR DINEW EMPLOYEE OR AP	POINTEE	
A FISCAL YEAR. PLEASE STATE BEI DECEMBER 31, 200 MANNER OF CALCULATING REPOR THE LEGISLATURE ALLOWS FILER REQUIRES FEWER CALCULATIONS instructions for further details). PLEAS COMPARATIVE (PERCENTAG PART A - PRIMARY SOURCES OF II NAME OF SOURCE OF INCOME CENTEX HOMES COASTAL ENGINEERING	LOW WHETHER THIS STATEMENT IS I A <u>OR</u> SPECIFY T STABLE INTERESTS: IS THE OPTION OF USING REPORT , OR USING COMPARATIVE THRESH E STATE BELOW WHETHER THIS STA E) THRESHOLDS ( NCOME [Major sources of income to the SOUR ADDR SEOI PULICAN BAJ NODIES, FL 3106 Same Hon NODIES, FL	FOR THE PRECEDING TAX YE TAX YEAR IF OTHER THAN THE TING THRESHOLDS THAT AR OLDS, WHICH ARE USUALLY ITEMENT REFLECTS EITHER DE TEMENT REFLECTS EITHER DE THE DE THE D	E CALENDAR YEAR:
PART B - SECONDARY SOURCES O NAME OF BUSINESS ENTITY	DF INCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	Post-It <sup>™</sup> brand fax transm To <u>DARIENE</u> Co. Dept. Fax #	nittal memo 7671 # ol pages • 4 From NANCY T Co. ELEC TIONS Phone # 39-533-6302 Fax #
PART C - REAL PROPERTY (Land, )	buildings owned by the reporting person)		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 on page 3.
			OTHER FORMS you may need to file are described on page 6.
CE FORM 1 - Eff. 1/2005 (Continued	d on reverse side)		PAGE 1

401K, Fidelity	Centex flomes		
, ,			_
	· · · · · · · · · · · · · · · · · · ·		
PART E LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR	•••
WS Bank	P.0. Dax 2464	OshKosh, WI 54903	
		1997 - Santa S	
PART F INTERESTS IN SPECIFIED BUSINESSE	S [Ownership or positions in certain to	pes of businesses]	
BUSINES	BUSI	SESS ENTITY # 2 BUSINESS	ENTITY # 3
BUSINESS ENTITY	IA		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5%		······································	
NATURE OF MY OWNERSHIP INTEREST			
ANY OF PAPTS A THROUGH		ARATE SHEET, PLEASE CHECK HE	
	ARE CONTINUED ON A SEI		
SIGNATURE (required):	mhen	DATE SIGNED (required):	19/05
prot	-	<del>.</del>	
	FILING INSTRUC	TIONS:	
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	If you were mailed the form by th on Ethics or a County Superviso		r/employee, state
sheet (pages 1 and 2) for filing.	for your annual disclosure filing, n to that location.	sturn the form file within 30 days of the	date of his or her
	Local officers/employees file with	appointment or of the beg ment. Appointees who mus	st be confirmed by
	of Elections of the county in whic nently reside. (If you do not perm	they perma- if that is less than 30 days for	
NOTE:	in Florida, file with the Supervisor	of the county appointment.	
MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form 1 for a	where your agency has its headqu	must file at the same tir	
calendar or fiscal year is not required to file a	State officers or specified state file with the Commission on Ethics	, P.O. Drawer quanying papers.	-
second Form 1 for the same year. However, a candidate who previously filed Form 1 because	15709, Tallahassee, FL 32317-5 address: 3600 Maclay Boulevard		
of another public position must at least file a copy of his or her original Form 1 when qualifying.	201, Tallahassee, FL 32312.	required to file by July 1 colored or upor is which the	
	Candidates file this form toget qualifying papers.	tions.	
	To determine what categor		
	falls under, see the "Who Must Fi on page 3.	e" Instructions specified state employee is final disclosure form (Form	required to file a
		of leaving office or employm	

p.2

CE FORM 1 - Eff. 1/2005

PAGE 2

## lowe\_d

To: Subject: disclosure@leg.state.fl.us John Landress Form 1



Landressj2004.pdf

Mr. John Landress lives in Lee County and has filed his Form 1 with Lee County. Attached will be a copy of his Form 1 for the 2004 filing year. Please remove him from the Collier County list as he does live in Lee County.

Thank you for your prompt attention to this matter.

Darlene Lowe Financial Disclosure Custodian lowe\_d

From:	disclosure [disclosure@leg.state.fl.us]
Sent:	Tuesday, August 30, 2005 2:56 PM
To:	lowe_d
Subject:	RE: John Landress Form 1

Please be advised that John Landress has been removed from your list of financial disclosure filers.

Kimberly R. Holmes
Program Specialist/Financial Disclosure Unit
Commission on Ethics
P.O. Drawer 15709
Tallahassee, FL 32317-5709
Telephone: (850) 488-7864
Fax: (850) 488-9657

-----Original Message-----From: lowe\_d [mailto:DarleneLowe@colliergov.net] Sent: Tuesday, August 30, 2005 11:57 AM To: disclosure Subject: John Landress Form 1

<<Landressj2004.pdf>> Mr. John Landress lives in Lee County and has filed his Form 1 with Lee County. Attached will be a copy of his Form 1 for the 2004 filing year. Please remove him from the Collier County list as he does live in Lee County.

Thank you for your prompt attention to this matter.

Darlene Lowe Financial Disclosure Custodian

FORM 1	STATEMEN	NT OF	FEE 2003
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL IN	NTERESTS	2004 JUN 29 PH 3: 20
AST NAME - FIRST NAME - MIDDLE		FOR OF	
CITY:	ZIP: COUNTY:		ID Code
NAPLES NAME OF AGENCY : ARBORWOOD COMW NAME OF OFFICE OR POSITION HELD BOARD OF SUDE	O OR SOUGHT :		Conf. Code P. Req. Code
	NEW EMPLOYEE OR APPOINTEE		
REQUIRES FEWER CALCULATIONS.	THE OPTION OF USING REPORTIN	G THRESHOLDS THAT A	ARE ABSOLUTE DOLLAR VALUES WHICH
	STATE BELOW WHETHER THIS STATE	DS, WHICH ARE USUALI	LY BASED ON PERCENTAGE VALUES (see
	STATE BELOW WHETHER THIS STATE	DS, WHICH ARE USUAL MENT REFLECTS FITHER Porting person]	LY BASED ON PERCENTAGE VALUES (see R (check one):
COMPARATIVE (PERCENTAGE PART A PRIMARY SOURCES OF IN NAME OF SOURCE	STATE BELOW WHETHER THIS STATE     THRESHOLDS     OR     [Major sources of income to the re     SOURCE	DS, WHICH ARE USUAL MENT REFLECTS FITHER Porting person] E'S SS	LY BASED ON PERCENTAGE VALUES (see R (check one): DOLLAR VALUE THRESHOLDS DESCRIPTION OF THE SOURCE'S
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COMPARATIVE (PERCENTAGE PART A PRIMARY SOURCES OF IN NAME OF SOURCE OF INCOME CENTEX HOMES	STATE BELOW WHETHER THIS STATE THRESHOLDS OR COME [Major sources of income to the re SOURCE ADDRES 5801 RELEAN BAY BLUE NEPLES, FL. 34106 3106 S. HORSESHOL	DS, WHICH ARE USUAL EMENT REFLECTS FITHER E SS D, SUTTE GOD	HOME BUILDER
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CE FORM 1 - Eff. 1/2004 (Continued on reverse side)

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			SUPER NOUND IN LEAVE
ART E LIABILITIES [Major debts]	1		
NAME OF CREDITOR			
US BANK	RO. Box 7.		
	ST. Lavis,	MISSOURE 6	3179-0117
ART F - INTERESTS IN SPECIFIED BUS	INESSES {Ownership or positions in a	certain types of businesses	3]
NAME OF	JSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
BUSINESS ENTITY	·		
PRINCIPAL BUSINESS			
POSITION HELD NITH ENTITY			
OWN MORE THAN A 5% NTEREST IN THE BUSINESS			
NATURE OF MY DWNERSHIP INTEREST			
IF ANY OF PARTS A THRO		A SEPARATE SHE	ET, PLEASE CHECK HERE
SIGNATURE (required):	Lanhess	DATE SI	IGNED (required): 6/29/04
	<u>V</u>		
	FILING INSTI	<u> RUCTIONS:</u>	
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signing and dating it, send back only the	to that location.	ining, retain the faint	appointment or of the beginning of employ- ment. Appointees who must be confirmed by
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From:	disclosure [disclosure@leg.state.fl.us]
Sent:	Tuesday, August 30, 2005 2:56 PM
То:	lowe_d
Subject:	RE: John Landress Form 1

Please be advised that John Landress has been removed from your list of financial disclosure filers.

Kimberly R. Holmes Program Specialist/Financial Disclosure Unit Commission on Ethics P.O. Drawer 15709 Tallahassee, FL 32317-5709 Telephone: (850) 488-7864 Fax: (850) 488-9657

-----Original Message-----From: lowe\_d [mailto:DarleneLowe@colliergov.net] Sent: Tuesday, August 30, 2005 11:57 AM To: disclosure Subject: John Landress Form 1

<<Landressj2004.pdf>> Mr. John Landress lives in Lee County and has filed his Form 1 with Lee County. Attached will be a copy of his Form 1 for the 2004 filing year. Please remove him from the Collier County list as he does live in Lee County.

Thank you for your prompt attention to this matter.

Darlene Lowe Financial Disclosure Custodian

		SUPER	VISOR O		Postal S RTIFIED	MAILIM RI	P COVORANA D.
To:	Local Offi	cers			OFF	on visit our websi	ite at www.
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