FORM 1	STATEM	STATEMENT OF				
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	<b>INTERES</b>	TS	FOR OFFICE USE ONLY:		
LAST NAME - FIRST NAME - MIDDLE LICHT, JE						
MAILING ADDRESS:	Zaro CT		1			
ESTERO CITY:	33928 ZIP: COUNTY:	LEE		125. 18.		
NAME OF AGENCY: HABITAT CDD  NAME OF OFFICE OR POSITION HEL  SUPERVISOR				8 RM 1 09 SOE		
CHECK ONLY IF A CANDIDATE	OR NEW EMPLOYEE OF	RAPPOINTEE	V	ਜ਼ਿੰ ਸ਼ਿ		
**** THIS SECTION MUST BE COMPLETED ****  DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2021.  MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES						
FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one):  COMPARATIVE (PERCENTAGE) THRESHOLDS  OR  DOLLAR VALUE THRESHOLDS						
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]  (If you have nothing to report, write "none" or "n/a")						
NAME OF SOURCE OF INCOME		URCE'S DRESS		SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY		
WISSOTA ART LLR	13309 Lazzar	100-		WORK/ INSTRUCTOR		
WISSOTA Rentals LLC	The same of the sa	1.5				
YEARLY Rental Yearly Rental	216 Mana Sota, FT Myers 33913 Rental 3225 E. Riverside AR., FT Myers 33913 Rental					
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")						
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURC		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")			lines o	e not limited to the space on the n this form. Attach additional , if necessary.		
8701 ESTERO BIVD #807 FT Myers Beach, FL 33931				INSTRUCTIONS for when here to file this form are		
216 Mana Sota FT Myers 33913 INSTRUCTIONS on who must file						
3225 E RIVERSIDE DR #43D FT Myers 33913				orm and how to fill it out on page 3.		

PART D — INTANGIBLE PERSONAL PROPERTY [Ste (If you have nothing to report, write "non		of deposit, etc See ins	tructions]	
TYPE OF INTANGIBLE		BUSINESS ENTITY TO V	WHICH THE PROPERTY RELATES	
N/A				
,				
PART E — LIABILITIES [Major debts - See instruction (if you have nothing to report, write "non				
NAME OF CREDITOR	1	ADDRES	S OF CREDITOR	
NA				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
PART F — INTERESTS IN SPECIFIED BUSINESSES (If you have nothing to report, write "none"	" or "n/a")	s in certain types of bus	inesses - See instructions]  BUSINESS ENTITY # 2	
NAME OF BUSINESS ENTITY	WISSOTA ART LLC		WissOTA Rentals Luc	
ADDRESS OF BUSINESS ENTITY	13309 LAZZGYUCT 33928		13309 LAZZANGET 33928	
PRINCIPAL BUSINESS ACTIVITY	ART		Rentals	
POSITION HELD WITH ENTITY	Co Owner		Co owner	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	i i i je s		405	
NATURE OF MY OWNERSHIP INTEREST	Co Owner- Wihusband		co owner w/ husband	
PART G — TRAINING For elected municipal officers, agency created under Part III, Chapter 163 required to a CERTIFY THAT I	complete annual ethics t	training pursuant to section	on 112.3142, F.S.	
IF ANY OF PARTS A THROUGH G ARE	CONTINUED ON	A SEPARATE SHE	ET, PLEASE CHECK HERE	
SIGNATURE OF FILE	R:	CPA or ATTORNEY SIGNATURE ONLY		
Signature:  Jeannette a. Licht	,	If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:  I,, prepared the CE Form 1 in accordance with Section 112,3145, Florida Statutes, and the		
Date Signed:  _1 June 2022	·	instructions to the form. Upon my reasonable knowledge and bellef, the disclosure herein is true and correct.  CPA/Attorney Signature:		
- July 2002		Date Signed:		
FILING INSTRUCTIONS:				
If you were mailed the form by the Commission on Et		ndidates file this form	together with their filing papers.	

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. To determine what category your position falls under, see page 3 of instructions.

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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

**MULTIPLE FILING UNNECESSARY:** A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

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 must file at the same time they file their qualifying papers.

**Thereafter**, file by July 1 following each calendar year in which they hold their positions.

**Finally**, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2021.