FORM 1	STATEMENT		2007				
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERESTS							
Lindsay Dave MAILING ADDRESS: 558 Chamon	~ <i>(</i>)	FOR OF USE ON					
Lehigh Acres 3 CITY: ZII East County 1	ct		#nreo.				
NAME OF AGENCY: Manager NAME OF OFFICE OR POSITION HELD OR		C. de	OBJUNOGANOG40 SCE				
You are not limited to the space on the lines on CHECK ONLY IF) ee 1 30						
BOTH PARTS OF THIS SECTION MUST BE COMPLETED DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (check one): DECEMBER 31, 2007 DECEMBER 31, 2007 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS: THE LEGISLATURE ALLOWS FILERS 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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS							
PART A PRIMARY SOURCES OF INCOM NAME OF SOURCE OF INCOME	g person]		N OF THE SOURCE'S BUSINESS ACTIVITY				
Rental Income Thomas Andrew Broyles	401 Baskins Creek Rd. TN #301 37738 401 Baskins Creek Rd. TN #301 37738		7	ntal			
Rental Income Cesarc + Maria Gregorat	2713 SW 21 PL, Cape Coral, F 33914 2713 SW 21 PL, Cape Coral, F 32914		Re Sa le	nta1			
PART B SECONDARY SOURCES OF INC		sources of income to ADDRESS OF SOURCE	f income to businesses owned by the reporting person] RESS PRINCIPAL BUSINESS				
PART C REAL PROPERTY [Land, buildin House 33-44-23-61-05 892 00 House 16-45-27-06-06011, 0060 Le	Hendry 9.0000	· ·	TRUCTIONS for when ile this form are locat- m of page 2.				
Land 1-28-44-06 A00-0212,000 Land 1-28-44-18-A00-0667.0000H	6.000 Hendry		ONS on who must file how to fill it out begin				
Land 1-28-44-18-A00-0087,0000 Land 1-28-44-18-A00-0128.0000 Land 1-28-44-18-A00-0128.0000	endry			RMS you may need to ned on page 6.			

PART D — INTANGIBLE PERSO TYPE OF INTANG		ks, bonds, certificat	es of deposit, etc.] BUSINESS ENTITY TO WHICH TH	E PROPERTY RELATES		
N/A						
	·			·		
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
Suacoast Schools FCU		P.O. Box 11904, Tampa, FL 33680				
Suncoast Schools FCU		P.O. Box 11904, Tampa, FL 33680 P.O. Box 11904, Tamps, FC 33680 P.O. Box 9001871, Louisville, KY 40290-1871				
Chase		P.O. Box 9001871, Louisville, KY 40290-1871				
			·	·····		
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
	BUSINESS ENTI	TY#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):	aval Em	DATE SIGNED	DATE-SIGNED (required): 6/21/08			
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 Blvd. 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 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.

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