FORM 1	STATEM	IENT OF	2011						
Please print or type your name, mailing address, agency name, and position belo	WI FINANCIAL	INTERESTS	n la						
	TILLE LCCIS	FOR OFFIC USE ONLY:							
126 6-40	mi Dreive		ID Code						
Frict Myers	ZIP: COUNTY:	CE	ID No. Di						
	i fr.CC		Conf. Code 4						
	LD OR SOUGHT:		ID No. 6 PH 4 10 50 PH 4 10 FH 4 10						
You are not limited to the space on the line CHECK ONLY IF D CANDIDATE	ines on this form. Attach additional sheets, OR INEW EMPLOYEE OR AF	· •	₩ 00 F						
	H PARTS OF THIS SECTI	ION MUST BE COMPL							
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR I A FISCAL YEAR. PLEASE STATE BEL DECEMBER 31, 2011		FOR THE PRECEDING TAX 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 (must check one):									
	E) THRESHOLDS OR NCOME [Major sources of income to the port, you must write "none" or "n/a")	ne reporting person - See instruction	IE THRESHOLDS ns p. 4]						
NAME OF SOURCE OF INCOME	· · · · ·	RCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY						
LEE COUNTY BeC									
[Major customers, clients, a	PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")								
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE						
$\Lambda/H$									
		<u></u>							
	buildings owned by the reporting person port, you must write "none" or "n/a")	- See instructions p. 4]							
~//+		wr	hen and where to file this form re located at the bottom of page 2.						
		file	NSTRUCTIONS on who must le this form and how to fill it out egin on page 3.						
			THER FORMS you may need file are described on page 6.						

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")							
		I	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
Creducesaviras		Sur	00157 solvers	is fectoral andit	-Unin-		
CVY CHARO / SQUIPAS		_ Cha	ASC				
	1						
PART E - LIABILITIES [Major de							
(If you have nothing to	report, you mu:	st write "none" or "r	n/a")				
NAME OF CREDIT	OR		ADDRESS	OF CREDITOR			
[]][+							
/							
PART F INTERESTS IN SPECIFI	ED BUSINESSES	Ownership or positi	ions in certain types of businesses	- See instructions p. 5]			
(If you have nothing to i		write "none" or "n/a' ESS ENTITY # 1	") , BUSINESS ENTITY #	2 BUSINESS ENTITY #	¥3		
NAME OF BUSINESS ENTITY							
ADDRESS OF BUSINESS ENTITY		14	<u> </u>				
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY		<u> </u>					
I OWN MORE THAN A 5%	<b></b>		<u> </u>				
NATURE OF MY			<u> </u>				
				ET, PLEASE CHECK HERE			
SIGNATURE (requi		1		NED (required):			
Titille	YH	frik		ie 4 12			
		FILING IN	STRUCTIONS:				
WHAT TO FILE:	Ĩ	WHERE TO		WHEN TO FILE:			
After completing all parts of this form, including		If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for		<i>Initially</i> , each local officer/employee, stat officer, and specified state employee mu			
<b>signing and dating it,</b> send back only the first sheet (pages 1 and 2) for filing.		your annual disclosure filing, return the form to that location.		file within 30 days of the date of his or he appointment or of the beginning of employment			
If you have nothing to report in a particular		Local officers/employees file with the Supervisor		Appointeres who must be confirmed by the Sena must file prior to confirmation, even if that is les			
section, you must write "none" or "n/a" in that section(s).		of Elections of the county in which they permanently reside. (If you do not permanently reside in			appointmer		
F		Florida, file with the Supervisor of the county where your agency has its headquarters.)		<b>Candidates</b> for publicly-elected local office mu file at the same time they file their qualifyir			
NOTE: S		State officers or	specified state employees	papers.			
MULTIPLE FILING UNNECESSARY: Generally, a person who has filed Form 1 for a 15 calendar or fiscal year is not required to file a ad		15709, Tallahasse address: 3600 Ma	nission on Ethics, P.O. Drawer ee, FL 32317-5709; physical aclay Boulevard, South, Suite	Thereafter, local officers/employees, sta officers, and specified state employees a required to file by July 1st following each calend			
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.		201, Tallahassee, F <b>Candidates</b> file ti	FL 32312. his form together with their	year in which they hold their positions. <i>Finally</i> , at the end of office or employment			
		qualifying papers.		each local officer/employee, state officer, and specified state employee is required to file final disclosure form (Form 1F) within 60 dat of leaving office or employment. However, fill of Earno 15 (Final Statement of Finance			
		To determine what category your position falls under, see the "Who Must File" Instructions on page 3.					

Facsimiles will not be accepted.

a CE Form 1F (Final Statement of Financal Interests) does not relieve the filer of filing a

CE Form 1 if he or she was in their position

December 31, 2011.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
<u> </u>	. SUIC	nost solas	is teleral (ra	1+1kin/			
NEW AVE AVER		N.R.					
PART E — LIABILITIES [Major debts - See in: (If you have nothing to report, yo		n/a")					
NAME OF CREDITOR		ADDRESS OF CREDITOR					
				 u			
······							
				<u>G</u>			
PART F — INTERESTS IN SPECIFIED BUSINE: (If you have nothing to report, you			s - See instructions p. 5j	P			
В	SUSINESS ENTITY # 1	BUSINESS ENTITY #	2 BUSINESS EN				
NAME OF BUSINESS ENTITY				<u>6</u>			
ADDRESS OF BUSINESS ENTITY	x/H						
PRINCIPAL BUSINESS ACTIVITY	/ X- [***********************************			0			
POSITION HELD WITH ENTITY	· · · · · · · · · · · · · · · · · · ·						
I OWN MORE THAN A 5%							
		[					
IF ANY OF PARTS A THROUG							
يبدد يويده يودعان ومعنا المعالية ويراكني كماني							
SIGNATURE (required):		DATE SIG	NED (required):				
	L.J.M.		2412				
	FILING IN	STRUCTIONS:					
WHAT TO FILE:	WHERE TO	FILE:	WHEN TO FILE:				
After completing all parts of this form, <u>including</u> <u>signing and dating it</u> , send back only the firs sheet (pages 1 and 2) for filing.	t on Ethics or a Coun your annual disclos	the form by the Commission ity Supervisor of Elections for sure filing, return the form to	<i>Initially</i> , each local officer/ officer, and specified state file <i>within 30 days</i> of the da	employee must ate of his or her			
If you have nothing to report in a particula		loyees file with the Supervisor	appointment or of the beginning Appointees who must be confirm	ned by the Senate			
section, you must write "none" or "n/a" in tha section(s).	of Elections of the cou	not permanently reside in	must file prior to confirmation, e than 30 days from the date of th				
	Florida, file with th	has its headquarters.)	<b>Candidates</b> for publicly-elected local office must file at the same time they file their qualifying				
NOTE: MULTIPLE FILING UNNECESSARY:		specified state employees ssion on Ethics, P.O. Drawer	papers.	moloucon state			
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 or	a 15709, Tallahassee address: 3600 Mac 301 Tallahassee	e, FL 32317-5709; physical lay Boulevard, South, Suite	<b>Thereafter</b> , 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 positions.				
another public position must at least file a copy of		is form together with their	Finally, at the end of office or employment,				

qualifying papers.

page 3.

To determine what category your position falls

under, see the "Who Must File" Instructions on

Facsimiles will not be accepted.

*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. However, filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.

## CE FORM 1 - Effective: January 1, 2012. Refer to Rule 34-8.202 (1), F.A.C.

his or her original Form 1 when qualifying.