FORM 1 STATEM	ENT OF FINANCIAL	INTERESTS 1999		
THIS STATEMENT REFLECTS MY FINANCIAL INTH PRECEDING TAX YEAR EXDING:	ERESTS FOR THE NAME OF YOUR AGE	NCY:		
CHECK EITHER OR SPECIFY TAX YEAR DECEMBER 31, 1999 THAN THE CALENDAR	IF OTHER YEAR: CAPTIVA &	us on REDUTION DESTRICT		
LAST NAME - FIRST NAME - MIDDLE NAME MADDEN JOHN	WJEL	FOLLOWING CATEGORIES:		
PO 305	SPECIFIED STAT	SPECIFIED STATE EMPLOYEE		
CITY. APTIVA ZIP. 33924	LIST OFFICE OR POSI	LIST OFFICE OR POSITION HELD OR SOUGHT:		
NOTICE: Under provisions of Se closure constitutes grounds for a fication from being on the ballot ment, demotion, reduction in sala	c. 112.317, Florida Statutes, a and may be punished by one o , impeachment, removal or st ary, reprimand, or a civil penalt	failure to make any required dis- or more of the following: disquali- uspension from office or employ- ty not exceeding \$10,000.		
PART A PRIMARY SOURCES OF INCOME [Sou	rces exceeding 5% of gross income]			
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
GREENWIDD ATHLETIC (LUB	GREEDWOD WILSGE, LOJE	MAJORATY DWNOR		
PLALA DEVELOPTICS	GREENWICED VINLASSI	57% PORTUGE		
- bit MODDED Co		40% OWNER		
PART B - SOURCES OF INCOME TO BUSINESS	ES OWNED BY THE REPORTING PERSON [N	fajor customers, clients, etc.]		
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
ABUVÉ				
PART C REAL PROPERTY [Land, buildings]				
FIDDLERS GREW (EWICE #	FILING INSTRUCTIONS for when and where to file this form are located at the bot- tom of page 2.			
FIDDLERS GREEN CENTER	<b>INSTRUCTIONS</b> on who must file this form and how to fill it out begin on page 3 of this packet.			
GREANWOOD DO	60; <u>11:000</u> 07 mp	OTHER FORMS you may need to file are described on page 6.		
RAZA NARWI		(Continued on p.2)		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]						
TYPE OF INTANGIBLE			BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
NA			- <u>-</u>			
				1. S.		
	·····		······································	<u></u>		
PART E - LIABILITIES IN EXCES	SS OF NET WORTH	[Major debts]				
NAME OF CREDITOR			ADDRESS OF CREDITOR			
NAUF	· · · · · · · · · · · · · · · · · · ·	······································			······································	
/ V ( / V )			<b>-,,,</b> ,,,	<u> </u>		
			<u></u>			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
	BUSINESS ENT	TTY # 1	BUSINESS ENTITY	#2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY	GRANWOST	AC	PLAZA DEU	HOTTES	WAN MADYN G	
ADDRESS OF BUSINESS ENTITY	FOHN WOU	D VillAGE	E FREEN WOULD	VILLAGO	HELEWIND VIHAAP	
PRINCIPAL BUSINESS ACTIVITY	11000 MEA	10 11	1 Universition	2 STV	Mit i Drive a con fil	
POSITION HELD WITH ENTITY	CHM		Black		A VEAL GET	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	52%		576		40%	
NATURE OF MY OWNERSHIP INTEREST	'apm'l	RANK	Gen'l otr	VR.	PHNR	
IF ANY PARTS OF A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE:	1	and the second	DATE SIGNED:	$\mathbf{O}$	(07)	
SIGNATORE: AND DATE SIGNED. 20 June 00						
FILING INSTRUCTIONS FOR FORM 1						

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. Note: You also may be required to file Form 10, which is the last page of this packet. Please see that form for detailed instructions.

**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: Local officers file with the Supervisor of Elections of the county in which you 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 Department of State, Room 1802, The Capitol, Tallahassee, Florida 32399-0250. **Candidates** file this form together with your qualifying papers. To determine what category your position falls under, see the "Who Must File" Instructions on page 3. If you were mailed the form by the Secretary of State or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

WHEN TO FILE: Initially, each *local officer, 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.

Thereafter, *local officers, state officers,* and *specified state employees* are required to file by July 1st following each calendar year they hold their positions. *Candidates* for publicly-elected state or local office must file at the same time they file their qualifying papers.

(Continued on p.3)