FORM 1		STATEMENT OF				2003			
Please print or type your name, mailing address, agency name, and position belo	ow:	FINANCIAL	INTERE	ESTS					
LAST NAME FIRST NAME MIDDLE NAME : MADDEN JOSEPH MICHAEL MAILING ADDRESS :					FFICE NLY:				
THE PRINCE TO POSITION HE	33° zip			o. AP O O O O O O O O O O O O O O O O O O					
CHECK IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE						: 27			
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, 2003 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									
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S									
LAW OFFICE OF Joseph M. Meddle dr UC ZZZZ.			DDRESS			PRINCIPAL BUSINESS ACTIVITY ALCOHOL / Lavo Use Atoney			
MADOW & BONE R.A.				Real Extely combite attorns					
PART B SECONDARY SOURCES (NAME OF BUSINESS ENTITY	NAM	ME [Major customers, clients, a E OF MAJOR SOURCES BUSINESS' INCOME	and other sources of ADDR OF SOL	ESS	business	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
						IO INCEDIOTIONS			
PART C REAL PROPERTY [Land, buildings owned by the reporting person] 1131 Vespy Drive Fort Marc FL 3390]					FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.				
1210 Vesper Drive Fort Myr FL 33907 2502 SANTA BELONE BIVIN COPE Cerol FL 33993					INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.				
					OTHE	R FORMS you may need to			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES									
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR							
ABNAMRO Mort	acre	8201 INNOVATION WAY CHIERGO IL GOLEZ							
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	LOW OFFICE OF JOSE	PLMWOROW L	C MADON & BONE P.	Α.					
ADDRESS OF BUSINESS ENTITY	LILL Second Street	1	ZZZZ Seema Stre	بل					
PRINCIPAL BUSINESS ACTIVITY	Albrus		pHoney						
POSITION HELD WITH ENTITY	MOUDGER Member	Alborer	president						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100%		5 0%						
NATURE OF MY OWNERSHIP INTEREST	100 %		50% auter Presiden	A L	_				
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE									
SIGNATURE (required):	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		DATE SIGNED (required): 2/1/05						
FILING INSTRUCTIONS:									
WHAT TO EUE		JERE TO FIL		WHEN TO FILE:					

WHAI IO 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:

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.

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.

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.

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 positions.

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.