FORM 1	STATEM	ENT OF	2008	}			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS					
LAST NAME - FIRST NAME - MIDDLE M MAIHLAND DO MAILING ADDRESS : 18381 PANTHE	FOR OFF USE ONL		_				
North Forst Mye	ee	ID Code	50,				
NAME OF AGENCY: Lee County Cle NAME OF OFFICE OR POSITION HELD DIRECTOR		P. Req. Code	JOS 60014820NDr50				
You are not limited to the space on the lines CHECK ONLY IF CANDIDATE O	PPOINTEE		30C				
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 OFTON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (check one): Image: colspan="2">Image: colspan="2">Image: colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Comparative the preceding tax year, whether based on a calendar year of the preceding tax year ending either (check one): Image: colspan="2">Image: colspan="2">Colspan="2">Colspan="2">Comparative the preceding tax year if other than the calendar year Image: colspan="2">Image: colspan="2">Comparative threests: 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): Image: comparative (PERCENTAGE) THRESHOLDS Image: colspan="2">Image: comparative thresholds Image: comparative (PERCENTAGE) THRESHOLDS Image: colspan="2">Image: colspan="2" Image: colspan= 2" <td< td=""></td<>							
PART A PRIMARY SOURCES OF INC NAME OF SOURCE OF INCOME	ne reporting person] RCE'S RESS	DESCRIPTION OF THE SOURCE PRINCIPAL BUSINESS ACTIVITY	-				
Lee Canty Clerk & Court	A	F+Myers F(3390)					
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of NAME OF MAJOR SOURCES ADDI BUSINESS ENTITY OF BUSINESS' INCOME OF SO			businesses owned by the reporting pers PRINCIPAL BUSINES ACTIVITY OF SOURC	s			
	·····						
PART C REAL PROPERTY [Land, bui	n]	FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2. INSTRUCTIONS on who must file					
			this form and how to fill it out b on page 3. OTHER FORMS you may nee file are described on page 6.	egin			

PART D — INTANGIBLE PERSO TYPE OF INTANG	ONAL PROPERTY [Stocks, GIBLE	, bonds, certific	ates of deposit, etc.] BUSINESS ENTITY TO WHICH	THE PROPERTY RELATES	
None					
4.					
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR			
None					
				· · · · · · · · · · · · · · · · · · ·	
PART F INTERESTS IN SPECI	IFIED BUSINESSES [Owne	ership or positic	ns in certain types of businesses]		
NAME OF	BUSINESS ENTITY	<u>′#1</u>	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
BUSINESS ENTITY	Nowe				
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): S131109				IED (required): 5/31/09	
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 Boulevard, 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 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.