FORM 1		STATEMENT (	2005				
Please print or type your name, mailing address, agency name, and position below	w:	FINANCIAL INTE	REST	TS			
LAST NAME FIRST NAME MIDDL  MAJUL ANTUI  MAILING ADDRESS:	vio,	JR. BAKER		R OFFICE E ONLY:			
12917 STONE	Tout	r wop		ID Code			
CITY: FORT MYERS	ZIP :	33413 COUNTY:	-	ID Code ID No. 595 ID No. Conf. Code P. Req. Code			
NAME OF AGENCY:  LEE COUNTY				Conf. Code			
NAME OF OFFICE OR POSITION HEL		P. Req. Code					
CHECK ONLY IF	OR	NEW EMPLOYEE OR APPOINTEE					
DECEMBER 31, 2005  MANNER OF CALCULATING REPORT THE LEGISLATURE ALLOWS FILERS REQUIRES FEWER CALCULATIONS, instructions for further details). PLEASE	TABLE II OR US	ETHER THIS STATEMENT IS FOR THE PROPERTY TAX YEAR IF  NTERESTS:  OPTION OF USING REPORTING THRES  ING COMPARATIVE THRESHOLDS, WHICE  BELOW WHETHER THIS STATEMENT RE	X YEAR, WHE ECEDING TAX OTHER THAN HOLDS THAT CH ARE USUA FLECTS EITH	ETHER BASED ON A CALENDAR YEAR OR ON AX YEAR ENDING EITHER (check one):  IN THE CALENDAR YEAR:  T ARE ABSOLUTE DOLLAR VALUES, WHICH ALLY BASED ON PERCENTAGE VALUES (see			
( 2 ( 2 ( 2 ( 2 ( 2 ( 2 ( 2 ( 2 ( 2 ( 2		SHOLDS OR  [Major sources of income to the reporting pe	roonl	DOLLAR VALUE THRESHOLDS			
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
LEE COUNTY		FURT MYERS, FLERIA		COUNTY GOVERNMENT			
TIAA - CREF *		NEW YERK, NEW YER	(K	PA BUYER (BUILDER)			
* PARTIAL WITHDROWALS OF 403B RETIREMENT FUNDS.							
PART B SECONDARY SOURCES OF NAME OF BUSINESS ENTITY	NAME	OF MAJOR SOURCES	ces of income ADDRESS F SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
ALONIZ							
NUNU							
PART C REAL PROPERTY [Land, buildings owned by the reporting person]  SINGLE FAMILY HOME - 12917 STEWE TEWER LOOP FIRE				FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.			
SINGLE FAMILY HOME - 12917 STONE TOWER LOOP, FUKT MYERS, FL 33913 (STEAP # 31-44-26-28-0000A.O. VACANT LAND-1407 NE 94 TH ST., CAPE CERAL, FL 33909				INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.			
(STRAP # 18-	43	24-02-05731.0150)		OTHER FORMS you may need to file are described on page 6.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]  TYPE OF INTANGIBLE   BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
STOCK BOND FUNDS & ANNOWY TIAA - CREF							
MUTUAL FUNDS *	VALIC						
* 4036 RETIRE	MENT FUNDS.						
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	NA	ADDRESS OF CRE	DITOR				
	7						
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
	SINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3				
NAME OF V BUSINESS ENTITY							
ADDRESS OF BUSINESS ENTITY							
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY		and the second s					
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): DATE SIGNED (required): JUNE 28, 2006							
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.