| FORM 1 | STATEMENT OF | , | 2003 | | | |
|---|--|---|--|--|--|--|
| Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERESTS | | | | | | |
| LAST NAME FIRST NAME MIDDLE NAM MARY LE MAILING ADDRESS: 17281 BRENFIELD | | FOR OFFICE USE ONLY: | | | | |
| CITY: ZIF | COUNTY: -33920 LEE E SOUGHT: | 1 \ / | | | | |
| **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 SOUR OF INCOME ADDRESS PRINCIPAL BUSINESS ACTI | | | | | | |
| Commercia Property LEE & LEON COUNTIES | | RENT | | | | |
| | | | | | | |
| NAME OF NAM | ME OF MAJOR SOURCES ADDI | DDRESS PRINCIPAL BUSINESS SOURCE ACTIVITY OF SOURCE | | | | |
| | | | | | | |
| | | | | | | |
| PART C REAL PROPERTY [Land, buildings owned by the reporting person] 2101 Mc Gregor Bios, Fort Myces, FL | | | G INSTRUCTIONS for when here to file this form are locathe bottom of page 2. | | | |
| 2101 Mebrewor BWD. H 1609 SEABOARD AUE, F 1625 CENTRUILLE CEAD 19281 BRENFIELD LANE | INSTRUCTIONS on who must file this form and how to fill it out begin on page 3. OTHER FORMS you may need to file are described on page 5. | | | | | |

| PART D — INTANGIBLE PERS TYPE OF INTANG | | cks, bonds, certifica | ates of deposit, etc.] BUSINESS ENTITY TO WHICH | THE PROPERTY RELATES | |
|--|---------------------|-----------------------|---|----------------------|--|
| NA | | | | | |
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| PART E — LIABILITIES [Major debts] NAME OF CREDITOR | | ADDRESS OF CREDITOR | | | |
| NA | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| PART F INTERESTS IN SPEC | IFIED BUSINESSES [O | wnership or position | ns in certain types of businesses] | | |
| | BUSINESS ENT | | BUSINESS ENTITY # 2 | BUSINESS ENTITY # 3 | |
| NAME OF BUSINESS ENTITY | NA | | | | |
| 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): | vy La M | on) | DATE SIGNED (required): グー /3~0 ゲ | | |
| 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 filling.

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 ner 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.

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 publicity-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.