FORM 1		STATEMENT OF 2018					2018		
Please print or type your name, mailing address, agency name, and position bet	ow:	FIN	AN	CIAI	INTE	CRE	ESTS	5	FOR OFFICE USE ONLY:
LAST NAME – FIRST NAME – MI McGarvey, John S.	DDLE N	AME :							1901
MAILING ADDRESS : 28574 LaCaille Drive		The state of the s							<u></u>
CITY:		ZIP :		COUNTY:					19JUN14Am083750ELeeCoF
Naples		4119		Collier					Ä
NAME OF AGENCY: Big Cypress Stewardship [Distric	t							EB
NAME OF OFFICE OR POSITION			T:		***************************************		. /		<u> </u>
Vice President - Board of S	Super	/isors					V		T]
You are not limited to the space on the	he lines d	on this form	. Attach a	dditional sh	eets, if necess	агу.	2m 6	1.0	
CHECK ONLY IF CANDIDAT	TE OF		NEW EM	PLOYEE O	R APPOINTE	E	PM 9		
**** BO	TH P	ARTS C	OF TH	IS SEC	TION MU	IST B	SE CO	MPLET	ED ****
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS Y YEAR OR ON A FISCAL YEAR. EITHER (must check one):	OUR F	INANCIAL	INTERE	ESTS FOR	THE PRECE	DING T	TAX YEAI	R, WHET	HER BASED ON A CALENDAR
DECEMBER 31	, 20 18	<u>OR</u>		SPEC	IFY TAX YEA	R IF OT	THER TH	AN THE (CALENDAR YEAR:
MANNER OF CALCULATING I FILERS HAVE THE OPTION OF I CALCULATIONS, OR USING CO for further details). CHECK THE	U SI NG I IMPARA	REPORTING THR	NG THRI ESHOL	ESHOLDS DS, WHICH	HARE USUA	BSOLU	JTE DOLI ASED ON	.AR VALU I PERCEI	JES, WHICH REQUIRES FEWER NTAGE VALUES (see instructions
COMPARATIVE	(PERC	CENTAGE) THRE	SHOLDS	OR	0	DOLL	AR VALI	JE THRESHOLDS
PART A PRIMARY SOURCES Of (If you have nothing to	F INCON	/IE [Major s write "non	sources o	of income to la")	the reporting	person	- See inst	ructions]	
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS					DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
See attached schedule	e								
to Code a Codicio and other contract of contract physics and other particles for the contract of the contract of the code of t	مناودة.	urcugio acto i i pocular	ogo i secusio o		275 <u>2</u> for				
PART B — SECONDARY SOURCE [Major customers, client (If you have nothing to	s, and of	her sources	s of incor	ne to busine	esses owned b	y the rep	porting pe	rson - See	instructions]
NAME OF BUSINESS ENTITY		ME OF MA			1	ADDRI OF SOL			PRINCIPAL BUSINESS ACTIVITY OF SOURCE
See attached schedule									
PART C REAL PROPERTY [Land (if you have nothing to					on - See instru	ictions]	· s / · Turbu		INSTRUCTIONS for when
See attached schedule					here to file this form are d at the bottom of page 2.				
							INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.		
								I	

PART D — INTANGIBLE PERSONAL PROPERTY (Storing of the control of t	e" or "n/a")	•	•			
TYPE OF INTANGIBLE	В	USINESS ENTITY TO V	VHICH THE PROPERTY RELATES			
None						
	Organistika enganise ilimose en a stron	Statement with the second of the second	. Name and the last two transfers which we will be a set of the control of the co			
PART E — LIABILITIES [Major debts - See Instructions (if you have nothing to report, write "non-						
NAME OF CREDITOR	ADDRESS OF CREDITOR					
None						
PART F — INTERESTS IN SPECIFIED BUSINESSES [(If you have nothing to report, write "none"	' or "n/a")	in certain types of bus	inesses - See instructions] BUSINESS ENTITY # 2			
NAME OF BUSINESS ENTITY	No	ne				
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						
PART G — TRAINING For elected municipal officers required to complete an I CERTIFY THAT I	٠.		, f.s. UIRED TRAINING.			
IF ANY OF PARTS A THROUGH G ARE	CONTINUED ON	A SEPARATE SHE	ET, PLEASE CHECK HERE 🗵			
SIGNATURE OF FILE	R:	CPA or ATT	ORNEY SIGNATURE ONLY			
Signature:		If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:				
JSUCS	7		, prepared the CE with Section 112.3145, Florida Statutes, and the Upon my reasonable knowledge and belief, the and correct.			
Date Signed: 06 −11 − 201	9	CPA/Attorney Signature:				
TO CONTRACT OF THE CONTRACT CO	Spranger Sanda - Traditional State Control of the C	Date Signed:	The second section of the			
THE THE DISTRICTIONS.						

<u>FILING INSTRUCTIONS:</u>

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. To determine what category your position falls under, see page 3 of instructions.

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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format) and send it to CEForm1@leg.state.fl.us. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

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 must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2018.

John McGarvey Supplemental Schedule to Form 1 - 2018

Part A - Primary Sources of Income

McGarvey Construction Company of Florida, Inc.
 Suite 8

 Bonita Springs, FL 34135

 J. McGarvey Construction Company, Inc.
 12702 Trade Way Drive Construction Suite 8

 Bonita Springs, FL 34135

 Westgate McGarvey, LLC
 12702 Trade Way Drive Real Estate Suite 8

Bonita Springs, FL 34135

John McGarvey Supplemental Schedule to Form 1 - 2018

Part B - Secondary Sources of Income

1. Westlinks Gateway, LLC	Neogenomics Laboratories	12730 et. Al. Commonwealth Drive Fort Myers, FL	Laboratories
2. Gateway RSW International, LLC	Diamond Tours	12641 Corporate Lakes Drive Fort Myers, FL	Tour Company
3. Gateway RSW International, LLC	NutraLuxe, M.D.	6835 International Center Blvd Fort Myers, FL	Beauty Products
4. Westgate McGarvey, LLC	Robb & Stucky	12600 Westlinks Drive Fort Myers, FL	Furniture Warehouse
5. Westgate McGarvey, LLC	Comcast of the South	12600 Westlinks Drive Fort Myers, FL	Cable Provider
6. Westgate McGarvey, LLC	Cintas	12600 Westlinks Drive Fort Myers, FL	Uniforms
7. McGarvey Construction Co. of Florida, Inc.	Southlinks Associates	12702 Trade Way Drive Suite 8 Bonita Springs, FL 34135	Commerical RE Developers
8. Southlinks Associates, LLC	Shaw Development LLC	12752 Trade Way Drive Bonita Springs, FL 34135	Manufacturer
9. Southlinks Associates, LLC	Fastenal Company	12752 Trade Way Drive Bonita Springs, FL 34135	Distributor
10. Southlinks Associates, LLC	J. McGarvey Construction Company, Inc.	12702 Trade Way Drive Suite 8 Bonita Springs, FL 34135	Construction

John McGarvey Supplemental Schedule to Form 1 - 2018

Part C - Real Property

6. Land and 1 building

1. 3 building lots and structures thereon Pine Ridge Estates Naples, FL 34119 2 building lots and structures thereon Naples Reserve Housing Community Naples, FL 34119 3. 4 building lots Quail West Golf & Country Club Naples, FL 34119 Westlinks Business Park 4. Land and 2 buildings 12650 et al. Westlinks Drive Ft. Myers, FL 33913 Quail West Golf & Country Club 5. 1 building lot and structures thereon Naples, FL 34119

> Southlinks Business Park 12752 et al. Trade Way Drive Bonita Springs, FL 31135

BONITH SPRINGS FL 34135

BUSINESS

POSTAGE WILL BE PAID BY ADDRESSEE

SUPERVISOR OF ELECTIONS PO BOX 2545
FORT MYERS FL 33902-9888

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES