FORM 1 F

FINAL STATEMEN 101 PM0442 SDE Lee Co F

2009

(TO BE FILED V	VITHIN 60 DAYS O	F LEAVING	PUBLIC (OFFIC	E OR	EMPLOYMENT)
LAST NAME — FIRST NAME — MIDDLE NAME: 111286389			NAME OF REPORTING PERSON'S AGENCY:			
MCGEE, JOHN T II 1589 E COVINGTON CIR FORT MYERS FL 33919		СН	_/			(see "Who Must File" on page 3):
- CITY: ZIP:	COUNT	T .	D SPECIFIED STATE EMPLOYEE LIST OFFICE OR POSITION HELD Historic Reservation Bon			
	***BOTH PARTS OF 1		SKTEL .		-	~c./
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FOR OFFICE OR EMPLOYMENT DESCRIPTION	FINANCIAL INTERESTS FOR RIBED ABOVE, WHICH DATE	THE PERIOD BE			09 AND	DELAST DATE I HILD THE PUBLIC 19. (Data must be briog to 17/31/09)
FEWER CALCULATIONS, OR USIN further details). PLEASE STATE BE	IS THE OPTION OF USING RE IG COMPARATIVE THRESHO LOW WHETHER THIS STATE	EPORTING THRES OLDS, WHICH AR EMENT REFLECTS	E USUALLY BAS EITHER (che	ASED ON eck one):	N PERCE	
	RCENTAGE) THRESHOLDS		R U		AR VALU	JE THRESHOLDS
PART A PRIMARY SOURCES NAME OF SOURCE OF INCOME	OF INCOME [Major source	es of income to the SOURCE'S ADDRESS	reporting pers	son]		RIPTION OF THE SOURCE'S ICIPAL BUSINESS ACTIVITY
		niversity Pe	PointeDr Financial Hovisi		ancial Hovisior	
Barney Ft Myers			3907	-	'	
	·					
PART B SECONDARY SOURCES OF INCOME [Major customers NAME OF BUSINESS ENTITY NAME OF MAJOR SOURCES OF BUSINESS' INCOME		JRCES I			me to bu	sinesses owned by reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE
None			-			
	<u> </u>					
			·			
PART C REAL PROPERTY [L					when	IG INSTRUCTIONS for and where to file this form are d at the bottom of page 2.
1589 Cavingto Ft Myars	F1 33919	7			this fo	RUCTIONS on who must file orm and how to fill it out begin ge 3 of this packet.
			<u></u>		OTHI	ER FORMS you may need to e described on page 6.

PART D — INTANGIBLE PER Type of Intand			s of deposit, etc.] IESS ENTITY TO WHICH TH	IE PROPERTY RELATES		
None						
Account to the second s						
	,					
PART E LIABILITIES [Majo NAME OF CRED			ADDRESS OF CR	EDITOR		
Chase	,	Home Lears				
e.						
	The state of the s					
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	,cish e					
PART F - INTERESTS IN SI	PECIFIED BUSINESSES	Ownership or position	ons in certain types of busine	sses)		
	BUSINESS ENTITY #	1 <u> E</u>	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY						
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:	Sn	₹ .	DATE SIGNED	6/20/2010		

FILING INSTRUCTIONS:

WHAT TO FILE:

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted.

WHEN TO FILE:

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

WHERE TO FILE:

Local officers: file with the Supervisor of Elections of the county in which you 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.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

NOTE:

If you are leaving office or employment during the first half of 2009, you may not have filed Form 1 for 2008. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2008 by July 1 of 2009.