FORM 1	STATEM	STATEMENT OF		2/0	2012			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTEREST	s [FOR OFFI	CE USE ONLY:			
LAST NAME - FIRST NAME - MIDDLE N MERICKS Ar MAILING ADDRESS:	on Anita		n\	roff	iced			
1500 Monroe	Street			,	98 . L-3			
F4 Myers		ee	4		13JUN12PMO251 SDE			
Lee Country 1	ZIP: COUNTY:				12PMQ			
Senior Account					원 [년			
NAME OF OFFICE OR POSITION HELD (V		H			
You are not limited to the space on the lines of CHECK ONLY IF CANDIDATE OF		•			[# @F1			
**** BOTH PARTS OF THIS SECTION MUST BE COMPLETED **** DISCLOSURE PERIOD: ITHIS 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 (must check one): DECEMBER 31, 2012 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS: ITHE 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). CHECK THE ONE YOU ARE USING:								
COMPARATIVE (PERC				THRESHOLDS				
	, you must write "none" or "n/a")			SCRIPTION OF T	THE SOURCE'S			
Lee County BCC	ADDR			RINCIPAL BUSINE				
			 					
(If you have nothing to report	other sources of income to business t, write "none" or "n/a")		irson - See	-				
NAME OF N BUSINESS ENTITY	IAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		ľ	PAL BUSINESS Y OF SOURCE			
					:			
PART C REAL PROPERTY [Land, buildi (If you have nothing to report,	lings owned by the reporting person you must write "none" or "n/a")	- See instructions]	when form a of pag INSTR file th	RUCTIONS on is form and h	o file this t the bottom who must now to fill it			
			file th		now to fill it			

(If you have nothing to report,)			uctionsj			
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
Well Fargo-Chec	lung Well	Wells Farge				
Checluna	San	San Coast School-Credit Union				
Savings	Sunc	Suncoast School-Chedit Union				
PART E — LIABILITIES [Major debts - See						
(If you have nothing to report, y	ou must write "none" or	"n/a")				
NAME OF CREDITOR		ADDRESS OF CREDITOR				
N/A						
<u> </u>						
PART F - INTERESTS IN SPECIFIED BUSIN	ESSES [Ownership or pos	sitions in certain types of businesse	es - See instructions]			
(If you have nothing to report, yo	u must write "none" or "n/ BUSINESS ENTITY # 1	/a") BUSINESS ENTITY	#2 BUSINESS ENTITY #3			
NAME OF BUSINESS ENTITY	DOGINE CONTRACTOR OF THE PROPERTY OF THE PROPE	20011200 2111111				
ADDRESS OF BUSINESS ENTITY						
PRINCIPAL BUSINESS ACTIVITY			H			
POSITION HELD WITH ENTITY	<u> </u>		<u> </u>			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS						
NATURE OF MY OWNERSHIP INTEREST						
IF ANY OF PARTS A THROU	GH F ARE CONTINU	ED ON A SEPARATE SHE	ET, PLEASE CHECK HERE			
SIGNATURE (required):		DATE SIG	NED (required):			
Ann Anta Merinas 6/11/13						
	FILING IN	STRUCTIONS	<u>:</u>			
WHAT TO FILE:	WHERE TO	FILE:	WHEN TO FILE:			
After completing all parts of this fincluding signing and dating it, send I only the first sheet (pages 1 and 2) for fi	oack on Ethics or a Co	d the form by the Commission ounty Supervisor of Elections disclosure filing, return the tion	Initially, each local officer/employ state officer, and specified state employmust file within 30 days of the date his or her appointment or of the beginn			
If you have nothing to report in a partic section, you must write "none" or "n/a" in section(s).	g to report in a particular rite "none" or "n/a" in that Supervisor of El which they permanently resident		of employment. Appointees who must confirmed by the Senate must file prior confirmation, even if that is less than days from the date of their appointment			
NOTE: MULTIPLE FILING UNNECESSARY: Generally, a person who has filed For for a calendar or fiscal year is not requ	m 1 State officers of	Supervisor of the county where your agency has its headquarters.) State officers or specified state employees file with the Commission on Ethics, P.O. Candidates for publicly-elected local must file at the same time they file qualifying papers. Thereafter, local officers/employees,				
to file a second Form 1 for the same y However, a candidate who previously Form 1 because of another public pos	filed Candidates file	allahassee, FL 32317-5709. this form together with their	Thereafter, local officers/employees, st officers, and specified state employ are required to file by July 1st follow each calendar year in which they hold the			

To determine what category your position falls

under, see the "Who Must File" Instructions on

Facsimiles will not be accepted.

page 3.

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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. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the first filing a CE Form 1 if he are she was in their

of filing a CE Form 1 if he or she was in th

position on December 31, 2012.

positions.

must at least file a copy of his or her original

Form 1 when qualifying.