

# FINAL STATEMENT OF FINANCIAL INTERESTS

2019

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

LAST NAME — FIRST NAME — MIDDLE NAME:

Meyers Gene Paul

NAME OF REPORTING PERSON'S AGENCY:

Lee County Port Authority

MAILING ADDRESS:

230 SW 37th Terrace

CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):

- ☒ LOCAL OFFICER    ☐ STATE OFFICER  
☐ SPECIFIED STATE EMPLOYEE

CITY: ZIP: COUNTY:

Cape Coral

33914

Lee

LIST OFFICE OR POSITION HELD:

Division Director of Administration

\*\*\*BOTH PARTS OF THIS SECTION MUST BE COMPLETED\*\*\***DISCLOSURE PERIOD:**THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2019 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS May 1, 2019, 2019. (Date must be prior to 12/31/19)**MANNER OF CALCULATING REPORTABLE INTERESTS:**

FILERS HAVE 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 (must check one):

- ☐ COMPARATIVE (PERCENTAGE) THRESHOLDS    OR    ☒ DOLLAR VALUE THRESHOLDS

**PART A -- PRIMARY SOURCES OF INCOME** [Major sources of income to the reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
ANEFX-New Economy Fund	333 S. Hope St. Los Angeles, CA 90071	Mutual Fund

# FINAL REPORT

**PART B -- SECONDARY SOURCES OF INCOME**

[Major customers, clients, and other sources of income to businesses owned by reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A			

**PART C -- REAL PROPERTY** [Land, buildings owned by the reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

N/A

**FILING INSTRUCTIONS** for when  
and where to file this form are  
located at the bottom of page 2.

**INSTRUCTIONS** on who must file  
this form and how to fill it out  
begin on page 3 of this packet.

**PART D — INTANGIBLE PERSONAL PROPERTY** [Stocks, bonds, certificates of deposit, etc. - See instructions]  
(If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
Checking Account	Bank of America
Savings Accounts	Suncoast Schools Federal Credit Union
Stocks	JetBlue Airways Corporation

**PART E — LIABILITIES** [Major debts - See instructions]  
(If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
Infiniti Financial Services	P.O. Box 78133, Phoenix, AZ 85062-8133
Suncoast Schools Federal Cr. Union	P.O. Box 11829, Tampa, FL 33680

**PART F — INTERESTS IN SPECIFIED BUSINESSES** [Ownership or positions in certain types of businesses - See instructions]  
(If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
ADDRESS OF BUSINESS ENTITY	N/A	
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 OF FILER:**

Signature:



Date Signed:

4/17/19

**CPA or ATTORNEY SIGNATURE ONLY**

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:

I, \_\_\_\_\_, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature \_\_\_\_\_

Date Signed \_\_\_\_\_

**FILING INSTRUCTIONS:**

**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 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 CEFom1@leg.state.fl.us. Do not file by both mail and email. Choose only one filing method.

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 2019, you may not have filed Form 1 for 2018. In that case, this is not the last form you will file. Form 1F covers January 1, 2019, through your last day of office or employment. You will be required to file Form 1 for 2018 by July 1, 2019, and risk being fined if you do not file Form 1 by the filing deadline, even if you have already filed the CE Form 1F.

Gene Meyers  
Financial Statement of Interest – 2019 *(Continued)*

**Part D – INTANGIBLE PERSONAL PROPERTY**

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
FRS2035 Retirement Fund	Florida Retirement System Investment Plan
Mutual Fund RPMGX	T. Rowe Price Mid Gap Growth
Mutual Fund PRNHX	T. Rowe Price New Horizons
Mutual Fund TRRAX	T. Rowe Price Retirement 2010
Mutual Fund PRSCX	T. Rowe Price Science & Tech
Mutual Fund PRGMX	T. Rowe Price GNMA
Mutual Fund PRFDX	T. Rowe Price Equity Income
Mutual Fund VAFAX	Invesco American Franchise A

**Part E – LIABILITIES**

NAME OF CREDITOR	ADDRESS OF CREDITOR
Synchrony Bank	P.O. Box 530912, Atlanta, GA



Direct Dial: (239) 590-4501  
Fax: (239) 590-4595

ROBERT M. BALL, A.A.E.  
EXECUTIVE DIRECTOR

RICHARD WM. WESCH  
PORT AUTHORITY ATTORNEY

April 17, 2019

14 APR 22 AM 0835 90E Lee Co Fl

BOARD OF  
PORT COMMISSIONERS

BRIAN HAMMAN

LARRY KIKER

FRANK MANN

JOHN E. MANNING

CECIL L. PENDERGRASS

Ms. Tammy Lipa  
Lee County Elections Office  
P.O. Box 2545  
Fort Myers, FL 33902

Dear Ms. Lipa:

Please find my enclosed Statement of Financial Interest-2018 that is required to be returned to your office by July 1, 2019.

Also, please find my Final Statement of Financial Interests-2019 that is due to your office within sixty (60) days of my resignation of employment with the Lee County Port Authority, which is effective May 1, 2019.

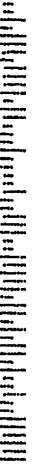
If you should need any additional information, please do not hesitate to contact me directly at the number above or, if after my end date, at my home email address at [gene@groundschool.org](mailto:gene@groundschool.org).

Sincerely,


LEE COUNTY PORT AUTHORITY

Gene P. Meyers  
Division Director of Administration

GPM/tam  
Enclosures




'19APR22AM0834 SDE Lee Co F1

  
LEE COUNTY PORT AUTHORITY  
Southwest Florida  
International Airport  
11000 Terminal Access Road, Suite 8671  
Fort Myers, Florida 33913-8899

*Mr. Danny Dipa  
Dee County Elections Office  
P.O. Box 2545  
Fort Myers, FL 33902*



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