FORM 1	STATEMENT OF		2013		
Please print or typo your name, mailing address, agency name, and position below:	FINANCIAL INTE	CRESTS		FOR OFFICE USE ONLY:	
1540 Roleigh St	E NAME :	'14JU	N24AM1	028 508 LEE CO F1	
Middlebrooks	Zwendolyn				
Fort Myers, Fla. 3	33916 Lee COUNTY:				
City or Fort Myers	Δ · · · Δ · · · · · · · · · · · · · · ·				
Public Art Committee NAME OF OFFICE OR POSITION HELD OR SOUGHT:					
Member of Public Art	Committee	\perp			
You are not limited to the space on the lin	es on this form. Attach additional sheets, if necessary OR NEW EMPLOYEE OR APPOINTER	·	123		
**** BOTH PARTS OF 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 (must check one):					
DECEMBER 31, 2013 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:					
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). CHECK THE ONE YOU ARE USING:					
☐ COMPARATIVE (PERCENTAGE) THRESHOLDS OR Ø 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	i		ESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Retired/Social	Federal governm	rent		1.0	
/ Security	J		/	\sqrt{H}	
		-		. 	
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the 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	
4/22					
1/10112					
PART C REAL PROPERTY (Land, bu	ildings owned by the reporting person - See instru rt, write "none" or "n/a")	ctions]	and v	G INSTRUCTIONS for when where to file this form are	
M/000			Incated at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out		
				on page 3.	

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			
A				
	<u>e</u>			
, ,				
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")				
NAME OF CREDITOR	ADDRES	S OF CREDITOR		
n [/]	\cap			
	H			
/ V /	7			
PART F — INTERESTS IN SPECIFIED BUSINESSES [(If you have nothing to report, write "none" NAME OF BUSINESS ENTITY		nesses - See instructions) BUSINESS ENTITY # 2		
ADDRESS OF BUSINESS ENTITY	A 1			
PRINCIPAL BUSINESS ACTIVITY	Alaha			
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):	DATE SIGNED (r	equired):		
Gwendolm Middle Grooks June 22 2014				
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.				
Signature		Date		
FILING INSTRUCTIONS:				
	<u>FILING INSTRUCTIONS.</u>			

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 filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

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 her 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; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

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.

Facsimiles will not be accepted.

WHEN TO FILE:

Initially, each tocal 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.

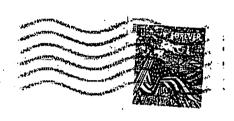
Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

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. However, filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2013.

G.Middlebrooks 1540 Raleigh St. Fort Myers, FL 33916

FT MYERS (FL 339)
23 JUNE 2014 FM 1.1.



Supervisor of Elections Sharon L. Harrington P.O. Box 2545 Fort Myers, FL 33902

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