FORM 1	S	STATEMENT OF			2004		
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERI				S			
LAST NAME FIRST NAME MIDD MIELKE, JER MAILING ADDRESS :	FREY L.			OFFICE ONLY:			
5092 WESTMI	USTER DR						
					Ka		
FT. MYERS	ZIP: 33919			•			
LEE COUNTY							
NAME OF OFFICE OR POSITION HELD OR SOUGHT: EXECUTIVE DIRECTOR - LEF CO. SPORTS AUTHORITY							
CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE							
**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 (check one):							
DECEMBER 31, 2004 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:							
MANNER OF CALCULATING REPORTABLE INTERESTS: THE 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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):							
COMPARATIVE (PERCENTAGE) THRESHOLDS OR OR DOLLAR VALUE THRESHOLDS							
PART A PRIMARY SOURCES OF NAME OF SOURCE OF INCOME	NCOME [Major sou	[Major sources of income to the reporting person] SOURCE'S ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
LEE COUNTY SPORT	5 270	5 BROADWAY	•	SPor	LTS MARKETING		
,							
			<u> </u>				
			ther sources of income ADDRESS OF SOURCE	to business	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
	<u> </u>						
PART C REAL PROPERTY [Land, buildings owned by the reporting person]					FILING INSTRUCTIONS for when and where to file this form are locat-		
HOUSE - 5092 WESTMINSTER DRIVE, FT. MYERS					the bottom of page 2.		
(TANGLEWOOD SUBDIVISION)					INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.		
					ER FORMS you may need to e described on page 6.		

PART D — INTANGIBLE PERSONAL PROPERTY TYPE OF INTANGIBLE	[Stocks, bonds, certified		ICH THE PROPERTY RELATES				
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR					
SALLIE MAE	Por	PO BOX 4600, WILKES-BARRE PA 18773					
WEUS FARGO BANK		······································					
SUNCOAST SCHOOLS FED. CREDITUNION							
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
	ENTITY # 1	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	<u>, , , , , , , , , , , , , , , , , , , </u>						
IF ANY OF PARTS A THROUGH F	ARE CONTINUE	D ON A SEPARATE SHE	ET, PLEASE CHECK HERE				
$\Omega \wedge $							
SIGNATURE (required):		DATE SIGNED (required): 7/1/65					
	FILING IN	<b>STRUCTIONS:</b>					
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 were mailed on Ethics or a Co	/HERE TO FILE:       WHEN TO FILE:         you were mailed the form by the Commission       Initially, each local officer/employee, state         a Ethics or a County Supervisor of Elections       officer, and specified state employee must         r your annual disclosure filing, return the form       the within 30 days of the date of his or her         that location.       officer, and specified state employee					
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	of Elections of the nently reside. (If yo in Florida, file with where your agency State officers or file with the Commi	bloyees file with the Supervisor county in which they perma- bu do not permanently reside the Supervisor of the county has its headquarters.) specified state employees ission on Ethics, P.O. Drawer e, FL 32317-5709; physical	<ul> <li>ment. Appointees who must be confirmed b the Senate must file prior to confirmation, eve if that is less than 30 days from the date of the appointment.</li> <li>Candidates for publicly-elected local offic must file at the same time they file the qualifying papers.</li> <li>Thereafter, local officers/employees, state</li> </ul>				
candidate who previously filed Form 1 because		clay Boulevard, South, Suite	officers, and specified state employees an				

*Candidates* file this form together with their qualifying papers.

201, Tallahassee, FL 32312.

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

*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.

of another public position must at least file a copy

of his or her original Form 1 when qualifying.

(-1)