				/	
FORM 1		STATEM	ENT OF	P	2012
Please print or type your name, mailing address, agency name, and position below	w:	FINANCIAL	INTERESTS		FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDL Moore - James - William	E NAME	:			13.11
MAILING ADDRESS : 867 Cypress Lake Circle					N249*
CITY:	ZIP :	COUNTY:		(13JUN24RM1031 SDE LEE COF
Fort Myers	33919			- \	
NAME OF AGENCY : Lee County Government				1	V 8
NAME OF OFFICE OR POSITION HE Director - Economic Developme		OUGHT:			Ţ
You are not limited to the space on the lit CHECK ONLY IF CANDIDATE		s form. Attach additional sheets, I NEW EMPLOYEE OR AP			
	H PAF	RTS OF THIS SECTION	ON MUST BE COM	PLETE	D ****
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU YEAR OR ON A FISCAL YEAR. PLE EITHER (must check one):	R FINAN	CIAL INTERESTS FOR THE ATE BELOW WHETHER THIS	PRECEDING TAX YEAR, V S STATEMENT IS FOR THE	WHETHER PRECE	BASED ON A CALENDAR DING TAX YEAR ENDING
DECEMBER 31, 20	12	OR SPECIFY 1	TAX YEAR IF OTHER THAN	THE CA	LENDAR YEAR:
MANNER OF CALCULATING REPO THE LEGISLATURE ALLOWS FILER REQUIRES FEWER CALCULATION (see instructions for further details).	S THE C S, OR U	PTION OF USING REPORTI SING COMPARATIVE THRES	ING THRESHOLDS THAT A SHOLDS, WHICH ARE USU	RE ABSO IALLY BA	LUTE DOLLAR VALUES, WHICH SED ON PERCENTAGE VALUES
COMPARATIVE (P	ERCEN	TAGE) THRESHOLDS Q	R DOLLAR	VALUE 1	THRESHOLDS
PART A - PRIMARY SOURCES OF I	NCOME bort, you	[Major sources of income to the must write "none" or "n/a")	e reporting person - See Instr	uctions]	
NAME OF SOURCE		SOUR ADDF			CRIPTION OF THE SOURCE'S
OF INCOME Investor's Security Trust Com	pany	12800 University Drive			ompany - Manages Investments
PART B — SECONDARY SOURCES [Major customers, clients, (If you have nothing to re	and other	r sources of income to business	ses owned by the reporting pe	rson - See	instructions]
NAME OF BUSINESS ENTITY		E OF MAJOR SOURCES BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A					
,, , , , , , , , , , , , , , , , , , , ,					
		Marian de la companya			
PART C — REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, you must write "none" or "n/a")					G INSTRUCTIONS for and where to file this
8500 Alico Road, Lee County, F	nd	form of pa	are located at the bottom ge 2.		
					RUCTIONS on who must his form and how to fill it
				out b	egin on page 3.

PART D — INTANGIBLE PERSONA (If you have nothing to	L PROPERTY (Stocks, bonds, cert report, you must write "none" or	ificates of deposit, etc See Instructions] "n/a")						
TYPE OF INTANGIBL	Ε	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
N/A								
				Mg [-vanit- [* - ']				
PART E — LIABILITIES [Major deb (If you have nothing to	is - See instructions] report, you must write "none" or	*n/a*)		JUN2481031				
NAME OF CREDITO	DR	ADDRESS OF CREDITOR						
N/A				8				
				H				
				H				
	D BUSINESSES (Ownership or pos sport, you must write "none" or "n	itions in certain types of businesses - See in	tructions)	DF.				
#. you nave noaming to n	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY #3					
NAME OF BUSINESS ENTITY	Florida Gulf Bank	N/A	N/A					
ADDRESS OF BUSINESS ENTITY	Fort Myers, FL							
PRINCIPAL BUSINESS ACTIVITY	Commercial Banking							
POSITION HELD WITH ENTITY	Chairman							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	No							
NATURE OF MY OWNERSHIP INTEREST	Common Stock							
IF ANY OF PARTS A T	HROUGH F ARE CONTINU	ED ON A SEPARATE SHEET, PLE	ASE CHECK HERE					
SIGNATURE (require	ed): _/	DATE SIGNED (required):						
Kames (1)	Moore	6.19.13						
FILING INSTRUCTIONS:								

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.

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 local 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 not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2012.

SUPERVISOR OF ELECTIONS PO BOX 2545 FORT MYERS FL 33902-2545



