FORM 1	STATEM	ENT OF	2012				
Please print or type your name, mailing address, agency name, and position belo	w: FINANCIAL	INTERESTS	FOR OFFICE U	SE ONLY:			
LAST NAME MIDDI Moyle James							
MAILING ADDRESS :	Kevis						
17420 Sterling Lake	L Dr.			eg James II.			
<i>(</i>	279,7 100			Ë			
CITY:	33967 Lee COUNTY:			S S			
Naples (Leserve (ZIP: COUNTY: Community Development	District		Ę			
lize Chair				30CT02#M101550E			
NAME OF OFFICE OR POSITION HE	LD OR SOUGHT:						
You are not limited to the space on the li	nes on this form. Attach additional sheets,	if necessary.		E S T			
CHECK ONLY IF CANDIDATE				T			
**** BOTH PARTS OF THIS SECTION MUST BE COMPLETED ****							
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOU	R FINANCIAL INTERESTS FOR THE	PRECEDING TAX YEAR, W	HETHER BASED ON A CALI	ENDAR			
YEAR OR ON A FISCAL YEAR. PLE EITHER (must check one):	EASE STATE BELOW WHETHER THI	S STATEMENT IS FOR THE	PRECEDING TAX YEAR EN	DING			
DECEMBER 31, 20	012 OR SPECIFY	TAX YEAR IF OTHER THAN	THE CALENDAR YEAR:				
MANNER OF CALCULATING REPO	PRTABLE 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). CHECK THE ONE YOU ARE USING: COMPARATIVE (PERCENTAGE) THRESHOLDS DOLLAR VALUE THRESHOLDS							
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]							
(If you have nothing to re	port, you must write "none" or "n/a")	aces I	DESCRIPTION OF THE S	SOLIDOE'S			
OF INCOME	ADDI	SOURCE'S ADDRESS		PRINCIPAL BUSINESS ACTIVITY			
i Star Financial	ar Financial 1114 Asems of the Americas, Suite 3		REIT				
			 _				
PART B SECONDARY SOURCES	OF INCOME			-			
[Major customers, clients,	and other sources of income to business aport, write "none" or "n/a")	ses owned by the reporting per	son - See instructions]				
NAME OF	NAME OF MAJOR SOURCES	ADDRESS	-				
BUSINESS ENTITY	OF BUSINESS' INCOME	OF SOURCE	E ACTIVITY OF SOURCE				
2/2							
DART C. DEAL PROPERTY II and	buildings owned by the reporting person	- See instructionel					
(If you have nothing to re	port, you must write "none" or "n/a")	r - See manuchonaj	FILING INSTRUCTION when and where to fil				
Asige done on me	Cate A.	form are located at the of page 2.	e bottom				
INSTRUCTIONS on who must							
		file this form and how to fill it					
			out begin on page 3.				

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
N/2							
	·	· 					
		<u>.</u>					
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF CREDITOR		ADDRESS OF CREDITOR					
Green Tree mortgage				02# 101			
Green Tree mortgage Com Financial			10				
				2			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, you must write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3							
NAME OF BUSINESS ENTITY	~/a						
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							
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required): DATE SIGNED (required):							
~/~		9/31/13					
FILING INSTRUCTIONS:							

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