FORM 1		STATEM	ENT OF		2007	
Please print or type your name, mailing address, agency name, and position bel	ow:	FINANCIAL	INTEREST	S		
LAST NAME FIRST NAME MIDD MUDGET WW MAILING ADDRESS:	JAN.	lÀ.		OFFICE ONLY:		
1308 ALHAMBR	4 1	PIVE		IDC	ode	
CITY: FORT MYERS NAME OF AGENCY:	ZIP	EE_	ID 1	\/ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \		
NAME OF OFFICE OR POSITION HE		OSPO		eq. Code		
FORD MEMBEL You are not limited to the space on the lines on this form, Attach additional sheets, if necessary.					Ľ	
CHECK ONLY IF CANDIDATE	OR	PPOINTEE		PDF 2007		
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, 2007 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 DOLLAR VALUE THRESHOLDS						
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE SOURCE'S OF INCOME ADDRESS					SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY	
Dia A/			TFIPST ST.		CHITECTURAL	
* Apentres,	NC.	FORT MYERS,	EL. 37901		SERVICES	
,						
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY	NAM	ME [Major customers, clients, E OF MAJOR SOURCES F BUSINESS' INCOME	and other sources of income ADDRESS OF SOURCE	to business	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
D.A.K. FLOREDA	GER	. COMPACTOR	GATEWAY, FT.A	YERS	GEN. CONTRACTOR	
LEE COUNTY			FORT MYENS, FO		GOVERNMENT	
CHAPLOTTE COUNTY			PORT CHARLOTTE	Fc.	SHOOL BOARD	
211-00041.0				<u> </u>		
PART C REAL PROPERTY [Land, buildings owned by the reporting person] [308 AUTOMISIA DIVE, FORT MYDIS, For					IG INSTRUCTIONS for when here to file this form are locat- the bottom of page 2.	
2/36 M=EPE60R BU	D. T	out mying fe			RUCTIONS on who must file orm and how to fill it out begin ge 3.	
	·				ER FORMS you may need to e described on page 6.	

PART D — INTANGIBLE PERSONA TYPE OF INTANGIBLE		rtificates of deposit, etc.] BUSINESS ENTITY TO WHICH TI	HE PROPERTY RELATES			
STUCK	PAPLER	PARKER/MUDGOTT/SMITH ARCHITECTS, INC.				
	,	/				
	·					
PART E — LIABILITIES [Major deb NAME OF CREDITO		ADDRESS OF CREDITOR				
WELLS FARCE MORTG	KAE CO_					
PART F — INTERESTS IN SPECIFIE	D BUSINESSES [Ownership or po	sitions in certain types of businesses]				
NAME OF	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
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						
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required):	equired): DATE SIGNED (required): 7/7/08					

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).

Facsimiles will not be accepted.

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.

FILING INSTRUCTIONS:

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: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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.

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.

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PARKER/MUDGETT/SMITH ARCHITECTS, INC. 2030-B West First Street Fort Myers, FL 33901

Lee County Elections Office P.O. Box 2545 Fort Myers, FL 33902-2545

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