FORM 1 STATEMENT OF 2000								
FINANCIAL INTERESTS								
LAST NAME — FIRST NAME — MIDDLE NAME:			NAME OF REPORTING PERSON'S AGENCY:					
OTTOLINI ROLAND EARL			The Control of the Co					
MAILING ADDRESS:			LEE COUNTY DIVISION OF MATURAL RETOURCES					
134 NE 19 14 AVE			CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):					
CARE .			☑ LOCAL OFFICER☐ CANDIDATE☐ SPECIFIED STATE EMPLOYEE					
CITY: ZIP: COUNTY:			LIST OFFICE OR POSITION HELD OR SOUGHT:					
CAPE CORAL 3	3909	LEE	DIVISION DI	DIVISION DINECTOR				
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, 2000 DR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS: PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VALUES. BEGINNING IN 2001, THE LEGISLATURE HAS ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS (old method) OR DOLLAR VALUE THRESHOLDS (new method)								
PART A PRIMARY SOURCES OF INCOME [Major sources of income to to NAME OF SOURCE SOUR ADDRESS OF INCOME ADDRESS OF INCO			CE'S	S DESCRIPTION OF THE SOURCE'S				
LEE COUNTY BUNIZIONS CO COMM.		PO BOX 318, F- MYETS, FL 3340Z		LOCAL GOVERNMENT				
								
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY	NAM	ME [Major customers, clients, a IE OF MAJOR SOURCES BUSINESS'S INCOME	and other sources of income to ADDRESS OF SOURCE	business	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
7026								
PART C REAL PROPERTY [Land, buildings owned by the reporting person]					FILING INSTRUCTIONS for when and where to file this form are			
RESTANCE ONLY		d at the bottom of page 2.						
	INSTRUCTIONS on who must file							
Skarnan					this form and how to fill it out begin on page 3 of this packet.			

SUPERVISOR OF

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OTHER FORMS you may need to file are described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE 1 BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
NA							
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR					
SUNCOAST SCHOOLS FCU - AUTO		PO BOX 11904 TAMPA, FL 33680					
HSBC -MONTHAUE		ONE MARC CENTIN, BUFFALO, MY 142:3-2811					
PART F — INTERESTS IN SPECIFIED BUSINESSES [ions in certain types of businesses] BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF	MA	1111#1	BOSINESS CIVITI 1 # 2	BOSINESS ENTITY # 5			
BUSINESS ENTITY ADDRESS OF	70/1						
BUSINESS ENTITY PRINCIPAL BUSINESS							
ACTIVITY POSITION HELD							
I OWN MORE THAN A 5%							
NATURE OF MY							
OWNERSHIP INTEREST							
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE:			DATE SIGNED:	5/31/01			

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.

NOTE: MULTIPLE FILING UNNECES-SARY:

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 file with the Supervisor of Elections of the county in which you 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 your 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, 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, 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, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.