FORM 1		STATEM	ENT OF		2013
Please print or type your name, mailing address, agency name, and position below	. I	FINANCIAL	INTERES	STS 14	NEORIGESCE VISEOROXI
LAST NAME - FIRST NAME - MIDDLI Ottolini Roland Earl	E NAME :				
MAILING ADDRESS : 12961 Turtle Cove Trail					1 4JL
					14JUN12PM0306 SDELEE COF
CITY: North Ft Myers	ZIP : 3390	COUNTY: 3 Lee			/ Ö3
NAME OF AGENCY: Lee County Board of County Commissioners					E 52
NAME OF OFFICE OR POSITION HELD OR SOUGHT: Director, Lee County Division of Natural Resources				$\sqrt{}$	(O)
You are not limited to the space on the line CHECK ONLY IF CANDIDATE	_	form. Attach additional sheets, NEW EMPLOYEE OR AF	-	V	<u>11</u>
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR YEAR OR ON A FISCAL YEAR. PLE EITHER (must check one): DECEMBER 31, 20 MANNER OF CALCULATING REPORM FILERS HAVE THE OPTION OF USI CALCULATIONS, OR USING COMPA further details). CHECK THE ONE YO	R FINANC ASE STAT 13 OF RTABLE I NG REPO RATIVE TO U ARE U	TE BELOW WHETHER THI SPECIFY OF THE SPECIFY OF THE SHOLDS THE SHOLDS, WHICH AFTE ISING:	PRECEDING TAX YES STATEMENT IS FO TAX YEAR IF OTHER HAT ARE ABSOLUTE RE USUALLY BASED	EAR, WHETHER OR THE PRECE THAN THE CA DOLLAR VALU ON PERCENTA	R BASED ON A CALENDAR DING TAX YEAR ENDING ALENDAR YEAR: JES. WHICH REQUIRES FEWER
PART A - PRIMARY SOURCES OF IN	COME [N	Aajor sources of income to the	e reporting person - Se	e instructions)	
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS		1	SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY
Lee CountyBoard of County Commissioners		PO Box 398 Ft Myers , FL 33902			local government
	+				
PART B - SECONDARY SOURCES ([Major customers, clients, a (If you have nothing to re)	nd other so port, write	ources of income to business	ses owned by the report	•	instructions] PRINCIPAL BUSINESS
BUSINESS ENTITY	OF E	BUSINESS' INCOME	OF SOUR	CE	ACTIVITY OF SOURCE
n/a					
	•		-		
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")				FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.	
· n/a					
				file t	RUCTIONS on who must his form and how to fill it egin on page 3.

cs, bonds, certificates of deposit, etc See instruction or "n/a")	ctions]		
BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
self			
self			
or "n/a")			
ADDRESS OF CREDITOR			
PO Box 11904 Tampa, FL 33680			
1 Corporate Dr, Suite 360, Lake Zurich, IL 60047-8945			
vnership or positions in certain types of busines r "n/a") BUSINESS ENTITY # 1	sses - See Instructions] BUSINESS ENTITY # 2		
'n/a			
CONTINUED ON A SEPARATE SHEE	T, PLEASE CHECK HERE		
DATE SIGNED (red	<u>quired):</u>		
6/10/14			
	Florida Bar prepared this form for you, he or		
, prepared the CE Form 1 in accordance wledge and belief, the disclosure herein is tr	e with Section 112.3145, Florida Statutes, and ue and correct.		
	Date		
THE THE THETTY CANA			
· · · · · · · · · · · · · · · · · · ·	WHEN TO EILE.		
	or "n/a") BUSINESS ENTITY TO WHILE SE SE OF "n/a") ADDRESS (PO Box 11904 T 1 Corporate Dr, Suite 360, I Mership or positions in certain types of business "n/a") BUSINESS ENTITY # 1 n/a CONTINUED ON A SEPARATE SHEE DATE SIGNED (recompleted) 473, or attorney in good standing with the II prepared the CE Form 1 in accordance		

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).

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.

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

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: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

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.

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, 2013.