FORM 1	STATEM	ENT OF	20034		
Please print or type your name, mailing address, agency name, and position below:					
LAST NAME FIRST NAME MIDDLE NAME: PARKER WILEY MOORE			OFFICE NLY:		
MAILING ADDRESS: 1233 COCONUT O	RIVE	l	<u></u>		
			ID Code		
CITY: ZIP: COUNTY: FORT MYERS 3390 LEE NAME OF AGENCY:			ID Code ID No. Conf. Code		
CONSCIUNTON LAND ACC		DSHIP	Conf. Code		
NAME OF OFFICE OR POSITION HELD OF MEMBER	₹ SOUGHT :		P.Req. Code		
	NEW EMPLOYEE OR APPOIN	NTEE	PDF 2003		
A FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2003/4. MANNER OF CALCULATING REPORTABL THE LEGISLATURE ALLOWS FILERS TH	NCIAL INTERESTS FOR THE PI MHETHER THIS STATEMENT IS OR SPECIFY E INTERESTS: E OPTION OF USING REPOR USING COMPARATIVE THRES TE BELOW WHETHER THIS ST	S FOR THE PRECEDING TAX TAX YEAR IF OTHER THAN RTING THRESHOLDS THAT CHOLDS, WHICH ARE USUAL	THE CALENDAR YEAR: ARE ABSOLUTE DOLLAR VALUES, WHICH LLY BASED ON PERCENTAGE VALUES (see		
PART A PRIMARY SOURCES OF INCOM			DOLLAR VALUE THRESHOLDS		
NAME OF SOURCE OF INCOME	NAME OF SOURCE SOURCE'S		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
PARKER/MUDGETT/SMITH			ARCHITEGURAL		
ARCHITECT, INC.	FORT MYERS,	FL 33901	Services		
	COME [Major customers, clients, ME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	b businesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
		2200 SECONO S			
		1	FTOD AVE PORT CHANGE F1,33943		
LEE COUNTY 2115 SEC			sm st., fr. Myby, R. 33901		
ISDAM OF COUNTY	<u>Commissioners</u>				
PART C REAL PROPERTY [Land, buildings owned by the reporting person]			FILING INSTRUCTIONS for when and where to file this form are locat-		
OFFICE BUILDING - 10% INTEREST			ed at the bottom of page 2.		
2130 McGreson Bun.			INSTRUCTIONS on who must file this form and how to fill it out begin		
FT-MYENG, FL 33301			on page 3.		
			OTHER FORMS you may need to		

PART D — INTANGIBLE PERSO TYPE OF INTANG		ks, bonds, certifi I	cates of deposit, etc.] BUSINESS ENTITY TO WHICH THE	PROPERTY RELATES	
STOCK		PARKER/MUDGET/SMITH ARCHITECTS, INC			
PROFIT SHARING	TRUST	PARKON/MUDACTI/SMITH ARCHITECT, IHC.			
		1 -	WYEE PLOFIT SHARIM		
IRAS		USB FINANCIAL SERVICES			
PART E LIABILITIES [Major NAME OF CREI		1	ADDRESS OF CRE	DITOR	
AAMG IHC		8600	INHOVATION WAY. C	HICAGO, IL G0682-0086	
Home Mons	TOAGE)				
PART F INTERESTS IN SPEC	IFIED BUSINESSES [O	wnership or posit	ions in certain types of businesses]		
	BUSINESS ENT	TTY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY					
ADDRESS OF BUSINESS ENTITY	NOHE				
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): WILEY M. PARKER DATE SIGNED (required): 16 JUNE 2004					
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 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.

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.

FORM 1	STATEM	ENT OF	2004 2003		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	STS RECEIVED		
LAST NAME FIRST NAME MIDDLE NAME : PARKER - WILEY - MOORE			FOR OFFICE USE ONLY: 2004 DEC 29 PM 3: 19		
MAILING ADDRESS: 1233 COCONUT DRIVE			SUPERVISOR OF ELECTIONS 1 ID Code		
	ip: county: 3901 LEE		ID No.		
NAME OF AGENCY: CONSERVATION LAND AC	duismon & Stewar	DSHIP	Conf. Code		
NAME OF OFFICE OR POSITION HELD O	R SOUGHT :		P. Req. Code		
			PDF 2003		
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, 2003 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, REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUE 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 INCOM NAME OF SOURCE OF INCOME	SOU	he reporting person] RCE'S PRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
PARKER MUDGETT/SMITH	2030-B WE	est first street	ARCHITECTURAL		
ARCHITECTS, INC.			SERVICES		
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources on NAME OF I NAME OF MAJOR SOURCES I ADDR			b businesses owned by the reporting person] PRINCIPAL BUSINESS		
BUSINESS ENTITY OF BUSINESS' INCOME OF S					
CITY OF FORT MYERS		2200 SEZOHO S	r. fr. Myber R. 33901		
LEE COUNTY		2115 SECAHO (1	., f. MYEN, R. 33901		
BOARD OF COUNTY	COMMISSIONERS				
PART C REAL PROPERTY [Land, buildings owned by the reporting person]			FILING INSTRUCTIONS for when and where to file this form are locat-		
OFFICE BUILDING - 10% INTEREST			ed at the bottom of page 2.		
2130 McGreson Blun.			INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.		
FT. MYERS, FL 33301					
			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 BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
STOCK PARKER/MUDGET/SMITH AACHTERSTI. INC			עיןאוכ			
PROFIT SHARING	TRUST	PARKON/MUDACTI/SMITH ARCHITECT INC.				
EMILOYEE PLANT SHAPING BANN 3:10						
IRAS USB FINANCIAL SERVICES						
		SUPERVISOR OF ELECTIONS				
DADE LIADUATIO NAME	1-1-1-1					
PART E — LIABILITIES [Major d NAME OF CRED	TIES [Major debts] ME OF CREDITOR ADDRESS OF CREDITOR					
AAMG IHC		8600	MHOUATION W	AV CHICAGO I	L 60682.00%	
	HOME MONTGAGE) 8600 INHOVATION WAY, CHICAGO, IL GO682-008				5 50000 0000	
						
PART F — INTERESTS IN SPECI	FIED BUSINESSES (OV	vnership or posit	ions in certain types of business	sesi		
	BUSINESS ENTI		BUSINESS ENTITY #	-	INESS ENTITY #3	
NAME OF BUSINESS ENTITY						
ADDRESS OF BUSINESS ENTITY	NO	NE			2 SU	
PRINCIPAL BUSINESS ACTIVITY					2004 I	
POSITION HELD WITH ENTITY					THE REPORT OF THE PERSON OF TH	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		· · · · · · · · · · · · · · · · · · ·			> \ \ \ \ \	
NATURE OF MY OWNERSHIP INTEREST		·			1 6 b	
<u> </u>						
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required):	way MPA	war	DATE	SIGNED (required):	ος ω C Navi Ama	
SIGNATURE (required): Which M. PARKER DATE SIGNED (required): 12 HOV 2004						
FILING INSTRUCTIONS:						

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