FORM 1	STATEME	NT OF	2002
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL I	NTERESTS	ENTERCUÉNTO
LAST NAME - FIRST NAME - MIDDLE NAMI PASSAYELLA KEN MAILING ADDRESS:	neth	FOR OF USE ON	
10040 Magnolia	Pointe		ID Code
CITY: ZIP	: county: 3919 Lee		ID No. 75495
Cocohatchee Communi- NAME OF OFFICE OR POSITION HELD OR S			Conf. Code P. Req. Code
CHECK IF CANDIDATE OR X	NEW EMPLOYEE OR APPOINTER	E	· .
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCE A FISCAL YEAR. PLEASE STATE BELOW WE DECEMBER 31, 2002 MANNER OF CALCULATING REPORTABLE THE LEGISLATURE ALLOWS FILERS THE REQUIRES FEWER CALCULATIONS, OR US instructions for further details). PLEASE STATE	HETHER THIS STATEMENT IS FO OR SPECIFY TA INTERESTS: OPTION OF USING REPORTIN SING COMPARATIVE THRESHO	CEDING TAX YEAR, WHETH OR THE PRECEDING TAX Y X YEAR IF OTHER THAN T NG THRESHOLDS THAT A LDS, WHICH ARE USUALL	YEAR ENDING EITHER (check one): HE CALENDAR YEAR: RE ABSOLUTE DOLLAR VALUES, WHICH LY BASED ON PERCENTAGE VALUES (see
COMPARATIVE (PERCENTAGE) THRE			DOLLAR VALUE THRESHOLDS
PART A PRIMARY SOURCES OF INCOME NAME OF SOURCE OF INCOME	SOURCI ADDRE	E'S SS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Passarella+Assoc.	9110 College P	ointe Ct. FL	Ecologist
	OME [Major customers, clients, and IE OF MAJOR SOURCES F BUSINESS' INCOME	d other sources of income to ADDRESS OF SOURCE	businesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PART C REAL PROPERTY [Land, buildings	s owned by the reporting person]		FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.
			INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
			OTHER FORMS you may need to file are described on page 6.

PART D — INTANGIBLE PERSO TYPE OF INTANG		s, bonds, certificate	es of deposit, etc.] BUSINESS ENTITY TO WHICH TH	IF PROPERTY RELATES		
	sion	Passa				
Var Loutus	1 Linds	Pain				
Var · privation	Furus	- I AIM	COCOPCI			
п, принцип						
PART E — LIABILITIES [Major	debts]					
NAME OF CREDITOR		ADDRESS OF CREDITOR				
USAA Mortgage		6000 Atrium Way, Mt. Laurel, N.J				
	J	· · · · · · · · · · · · · · · · · · ·	A STATE OF THE STA			
				· · · · · · · · · · · · · · · · · · ·		
PART F — INTERESTS IN SPEC	IFIED BUSINESSES [Ov	nership or position	s in certain types of businesses]			
NAME OF	BUSINESS ENTI	TY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	Passarelh.	t Assa				
ADDRESS OF BUSINESS ENTITY	9110 College	Pointe				
PRINCIPAL BUSINESS ACTIVITY	Ecology	<u> </u>				
POSITION HELD WITH ENTITY	Presiden	1				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	yes		- Address			
NATURE OF MY OWNERSHIP INTEREST	100	20 L				
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required):	- Barandle		DATE SIGNED			
fil	0/-01	TATO TATO	TOLICTIONS	10/23/03		
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.

TIME OF REAL PROPERTY.

WHERE TO FILE:
If you were mailed the

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.

PART D — INTANGIBLE PERSONA TYPE OF INTANGIBLE		ks, bonds, certific		CH THE PROPERTY RELATES			
401-K Pension		Passarella + Assoc.					
Var. mutual	funds	Pai					
•							
and the second s							
			·				
PART E — LIABILITIES [Major debt NAME OF CREDITO		1	ADDRESS, e	OF CREDITOR			
USAA Mortagae		600 Atrium Way, Mt. Laurel, NJ					
USANT PROFISE							
PART F — INTERESTS IN SPECIFIE							
NAME OF	BUSINESS ENT	Λ	BUSINESS ENTITY # 2	BOSINESS BINITING P			
BUSINESS ENTITY ADDRESS OF	asarena 1110 College	t Assa.					
BUSINESS ENTITY PRINCIPAL BUSINESS	Ft. Myer	s, FL		C C			
ACTIVITY POSITION HELD WITH ENTITY	Presiden	+		1			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Ves						
NATURE OF MY OWNERSHIP INTEREST	100	00		, ω , ω			
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required):	Passands		DATE S	GNED (required): 10/ 23/03			
FILING INSTRUCTIONS:							
WHAT TO FILE: After completing all parts of this form		HERE TO FIL	.E: the form by the Commission	WHEN TO FILE: Initially, each local officer/employee, state			

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State of Florida COMMISSION ON ETHICS 3600 Maclay Boulevard, South, Suite 201 P.O. Drawer 15709 Tallahassee, FL 32317-5709 Bonnie J. Williams

Executive Director

Philip C. Claypool General Counsel

(850) 488-7864 Phone 278-7864 Suncom (850) 488-3077 (FAX) www.ethics.state.fl.us

March 15, 2004

Kenneth Passarella 100440 Magnolia Pointe Ft. Myers, Florida 33919

Dear Mr. Passarella:

Your Form 1, Statement of Financial Interests, has been misfiled with the Commission on Ethics. By copy of this letter, I am forwarding said form to the Lee County Supervisor of Elections for appropriate filing.

Sincerely,

Shirley A. Taylor Program Manager

cc: Philinda Young

Lee County Supervisor of Elections (w/enclosure)