FORM 1 STATEMENT	OF FINANCIAI	L INTERESTS 1997
THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR PRECEDING TAX YEAR ENDING: CHECK EITHER DECEMBER 31, 1997 THAN THE CALENDAR YEAR: LAST NAME - FIRST NAME - MIDDLE NAME: PAXSON, CUIFFORD HOSTON MAILING ADDRESS: 5531 HALIFAX AVENUE	SOUTH TRAIL FIREFIGHTERS PENSION FUND-TRUSTEE N.FT. MYERS FIREFIGHTERS PENSION FUND-TRUSTEE LEE COUNTY CONSTRUCTION BOARD OF APPEALS - BOARD MEMBER CHECK ONE OF THE FOLLOWING CATEGORIES: LOCAL OFFICER STATE OFFICER CANDIDATE	
(0) 0) 14 (2) 6 0	NTY: L EE	
NOTICE: Under provisions of Sec. 112.3 closure constitutes grounds for and may fication from being on the ballot, impeament, demotion, reduction in salary, representation of the primary sources of the sources exceed the provision of the sources exceed the provisions of the sources exceed the provisions of Sec. 112.3		suspension from office or employ- lity not exceeding \$10,000.
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
PART B — SOURCES OF INCOME TO BUSINESSES OWNED	BY THE REPORTING PERSON	[Major customers, clients, etc.]
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
None		N I ID 56 MY '98
PART C — REAL PROPERTY [Land, buildings]		FILING INSTRUCTIONS for when
NONE REQUIRING REPORTS	₩ 5	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 of this packet. OTHER FORMS you may need to file are described on page 6.
		(Continued on p.2)

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OF NET WORTH [Major debts]		
	ADDRESS OF CREDITOR	
BUSINESSES [Ownership or po	sitions in certain types of businesses]	
BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NONE	None	None
	BUSINESSES [Ownership or po	BUSINESSES [Ownership or positions in certain types of businesses] BUSINESS ENTITY # 1 BUSINESS ENTITY # 2

FILING INSTRUCTIONS FOR FORM 1

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: You also may be required to file Form 10, which is the last page of this packet. Please see that form for detailed instructions.

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: 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 Department of State, Room 1802, The Capitol, Tallahassee, Florida 32399-0250. 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. If you were mailed the form by the Secretary of State or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

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. Thereafter, local officers, state officers, and specified state employees are required to file by July 1st following each calendar year they hold their positions. Candidates for publicly-elected state or local office must file at the same time they file their qualifying papers.

(Continued on p.3) F

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