FORM 1 F

FINAL STATEMENT OF FINANCIAL INTERESTS

2005

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

LAST NAME — FIRST NAME — MIDDLE NAME: NAME OF REPORTING PERSON'S AGENCY:						
Pollard, Fred W.	Nuisance Abatement Board					
MAILING ADDRESS:	CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):					
5100 S. Cleveland Ave Ste 318						
PMB 380	☐ LOCAL OFFICER ☐ STATE OFFICER☐ SPECIFIED STATE EMPLOYEE					
CITY: ZIP: COUNTY:	LIST OFFICE OR POSITION HELD:					
Fort Myers, FL 33907 Lee_	District 2					
BOTH PARTS OF THIS SECTION MUST BE COMPLETED						
DISCLOSURE PERIOD:						
THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2005 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS						
MANNER OF CALCULATING REPORTABLE INTERESTS: THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see 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 INCOME [Major sources of income to the reporting person] NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S						
OF INCOME ADDRI	ESS PRINCIPAL BUSINESS ACTIVITY					
Castle Properties Unlimited PMB 380 FAN	land the Ste 318 Rental Real Estate					
DART R. OF CONDARY COMPOSE OF INCOME						
PART B SECONDARY SOURCES OF INCOME [Major customers, cl	lents, and other sources of income to businesses owned by reporting personj ADDRESS PRINCIPAL BUSINESS					
BUSINESS-ENTITY OF BUSINESS' INCOME	OF SOURCE ACTIVITY OF SOURCE					
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50°						
LL & 2						
<u>u</u> 25 <u>u</u>						
S	FU INC INCTRICTIONS					
PART C REAL PROPERTY [Land, buildings owned by the reporting pe	and where to file this form are locat-					
1710/12 Cypness Dr. Fort Myers FL 339	07					
1722/24 Capress Dr., too Myers, FZ 33	INSTRUCTIONS on who must file this form and how to fill it out begin					
1726/28 Cagness Dr., Fort Plyers, FL 33	on page 3 of this packet.					
	33%7 OTHER FORMS you may need to					
5440/44 11th Ave Fort Muers FL 3	file are described on page 6.					

	PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]						
TYPE OF INTANG		, , \sim	WHICH THE PROPERTY	Z RELATES			
Stock	('aš	tle Properties	Unlimited	Inc.			
)				
	<u> </u>						
PART E — LIABILITIES [Majo							
NAME OF CREDI	NAME OF CREDITOR ADDRESS OF CREDITOR						
			CIA				
			TIMA				
			Demonstra	Rose-			
		·					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
i r	BUSINESS ENTITY # 1	BUSINESS ENTI	TY#2 I BL	JSINESS ENTITY # 3			
NAME OF							
BUSINESS ENTITY -							
ADDRESS OF BUSINESS ENTITY)					
PRINCIPAL BUSINESS							
ACTIVITY							
POSITION HELD WITH ENTITY							
I OWN MORE THAN A 5%			·				
INTEREST IN THE BUSINESS							
NATURE OF MY.? OWNERSHIP INTEREST							
OVINCTORIII THE CITEOT							
IF ANY OF PARTS A	THROUGH F ARE CONTI	MIED ON A SEPARATE	SHEET DI FASE CH	ECK HEBE			
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
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SIGNATURE:		/ DA	ATE SIGNED:	/) 7/15			
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FILING INSTRUCTIONS:

WHAT TO FILE:

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only the first sheet for filing (you need not return any of the instruction pages).

WHEN TO FILE:

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, unless you take another position within the 60-day period that requires you to file financial disclosure on Form 1 or Form 6

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 Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Sutie 201, Tallahassee, FL 32312.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

NOTE:

If you are leaving office or employment during the first half of 2005, you may not have filed Form 1 for 2004. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2004 by July 1 of 2005.