FORM 1		STATEM	IENT OF		2010				
Please print or type your name, mailing address, agency name, and position be	ow:	FINANCIAL	INTERES'	TS [
LAST NAME FIRST NAME MIDE	LE NAM	≣:	FO	R OFFICE					
Pritt, Robert Dwane			US	E ONLY:	/				
MAILING ADDRESS: 25070 Ascot Lake Cour	-			_1					
25070 Inscot India oout			· - ···	\ ID	Pode 5				
CITY:	ZIP			 	lo.				
Bonita Springs	34134		4.	ro vie ro					
NAME OF AGENCY: City of Bay Creek Community D			Con	Code JUNO PARTO SECONDARIO SECOND					
NAME OF OFFICE OR POSITION H		***	P.R	eq. Code 📆					
1									
Total are not minited to the space on the intes on this form, Attach additional sheets, it necessary.									
CHECK ONLY IF CANDIDATE	OR	☐ NEW EMPLOTEE OR A	PPOINTEE						
DISCLOSURE PERIOD:	**	BOTH PARTS OF THIS SECT	ION MUST BE COMPLET	ED**					
THIS STATEMENT REFLECTS YOUR									
A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one): DECEMBER 31, 2010 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:									
MANNER OF CALCULATING REPOR									
THE LEGISLATURE ALLOWS FILE REQUIRES FEWER CALCULATIONS	S THE	OPTION OF USING REPOR							
instructions for further details). PLEAS									
COMPARATIVE (PERCENTAGE	E) THRE	SHOLDS <u>OR</u>	DOLL.	AR VALUE TH	IRESHOLDS				
PART A PRIMARY SOURCES OF (If you have nothing to re	NCOME port, yo	[Major sources of income to to u must write "none" or "n/a"]	he reporting person])						
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
Roetzel & Andress, L.P.A.		850 Park Shore Drive Naples, FL			Law				
		34103							
<u>,</u>									
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]									
• •	• •	ou must write "none" or "n/a			I poworny puguicas				
NAME OF BUSINESS ENTITY		E OF MAJOR SOURCES BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE				
PART C REAL PROPERTY [Land (If you have nothing to re	buildings port, you	n]		FILING INSTRUCTIONS for when and where to file this form					
1060 Borghese, U1702,	Naples	er Ray. IIC)		cated at the bottom of page 2.					
180 Goldfinch, N. Capt			RUCTIONS on who must						
		1110 111	is form and how to fill it out . on page 3.						
Lot 50 & 51 Safety Harbor N. Captiva Is. " (Backwater Bay, VI VII) begin on page 3. VII) OTHER FORMS your									
4510 Smugglers Dr. N. Captiva Is. " (Backwater Bay IV, LLC)					are described on page 6.				
				_					

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] (If you have nothing to report, you must write "none" or "n/a")									
fit you have nothing to report, you must write none of that.)									
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
IRA		Wells Fargo Advisors, 5801 Pelican Bay Blvd. Ste.200							
					Naples, FL				
401K		Schwab Retirement Schwab.com							
457		ICMARC 777 N. Capitol St., Washington DC 20002							
IRA		Fidelity							
PART E — LIABILITIES [Major debts] (If you have nothing to report, you must write "none" or "n/a")									
NAME OF CREDITOR		ADDRESS OF CREDITOR							
		·							
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses] (If you have nothing to report, you must write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3									
NAME OF BUSINESS ENTITY	See attached	- Part F							
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									
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE 💂									

SIGNATURE (required); Rott D. P.W.

DATE SIGNED (required): 06~06~201

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.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

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; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

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 the 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 off to 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.

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<u>#3</u>

Name of Business Entity:

Backwater Bay, LLC V (Goldfinch)

Address of Business Entity:

14862 Crescent Cove, Ft. Myers, FL

Principal Business Activity:

Real Estate

Position Held with Entity:

Member

I own more than a 5% interest in the business.

Yes

Nature of my ownership

interest:

20%

Name of Business Entity:

Backwater Bay, LLC VI- VII (Lots 50-51)

Address of Business Entity:

14862 Crescent Cover, Ft. Myers, FL

Principal Business Activity:

Real Estate

Position Held with Entity:

Member

I own more than a 5%

interest in the business.

Yes

Nature of my ownership

interest:

25%

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DISCLOSURE OF INTEREST – ROBERT DWANE PRITT

Part F:

#1

Name of Business Entity:

Backwater Bay, LLC (Borghese)

Address of Business Entity:

14862 Crescent Cove, Ft. Myers, FL

Principal Business Activity:

Real Estate

Position Held with Entity:

Member

I own more than a 5%

interest in the business.

Yes

Nature of my ownership

interest:

20%

<u>#2</u>

Name of Business Entity:

Backwater Bay, LLC IV (Smugglers)

Address of Business Entity:

14862 Crescent Cove, Ft. Myers, FL

Principal Business Activity:

Real Estate

Position Held with Entity:

Member

I own more than a 5%

interest in the business.

Yes

Nature of my ownership

interest:

10%