

Bernie Feliciano

From: "EVANS.CONNIE" <EVANS.CONNIE@leg.state.fl.us>
To: "Bernie Feliciano" <bfeliciano@leeelections.com>
Cc: <randyann@charlottevotes.com>
Sent: Friday, August 03, 2007 3:54 PM
Subject: FW: Lyman Randall 209294

COPY

He has been changed to Charlotte County.

From: Bernie Feliciano [mailto:bfeliciano@leeelections.com]
Sent: Friday, August 03, 2007 3:49 PM
To: EVANS.CONNIE
Cc: MOLLY SCHWEERS; JIM MUDD; SANDY WHARTON; BLANCHE HOUSE
Subject: Lyman Randall 209294

Hi Connie,

Regarding 209294:

78	Randall	Lyman	Gasparilla Island Bridge Authority- Board Of Supervisors (PFR)	PO Box 1734 Boca Grande, FL 33921
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I spoke with Mr. Randall today. He resides in Charlotte County and his Charlotte County voter registration record reflects a residence address in that county. His Form 1 Statement of Financial Interest will be forwarded, to Charlotte County SOE, by the Lee County Community Planning Panel liaison, Jim Mudd. Mr. Randall filed his original Form 1 with that office instead of the Supervisor of Elections, so that office has agreed to forward his form on to Charlotte County.

Please place Mr. Randall on the Charlotte County list of filers. Thank you for your help. Bernie

Bernie Feliciano
Qualifying Officer
Lee County Elections Office
P O Box 2545
Fort Myers FL 33902-2545
bfeliciano@leeelections.com
239-533-6304 Direct/Directo
239-533-8683 Main/Núm. Principal
239-533-6325 Para Español
239-533-6310 Facsimile/Facsimile
Visit Our Website At:
Visitenos En El Web:
www.leeelections.com

Bernie Feliciano

From: "Bernie Feliciano" <bfeliciano@leeelections.com>
To: "CONNIE EVANS" <EVANS.CONNIE@leg.state.fl.us>
Cc: "MOLLY SCHWEERS" <schweemm@leegov.com>; "JIM MUDD" <jmudd@leegov.com>;
 "SANDY WHARTON" <sandy@charlottevotes.com>; "BLANCHE HOUSE"
 <blanche@charlottevotes.com>
Sent: Friday, August 03, 2007 3:49 PM
Subject: Lyman Randall 209294

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Hi Connie,

Regarding 209294:

78 Randall Lyman Gasparilla Island Bridge Authority- PO Box 1734
 Board Of Supervisors (PFR) Boca Grande, FL 33921

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FORM 1

STATEMENT OF

2006

FINANCIAL INTERESTS

Please print or type your name, mailing address, agency name, and position below:

LAST NAME - FIRST NAME - MIDDLE NAME:
randall, lyman K.

MAILING ADDRESS:
p.o. box 1541 gulf shores drive (16030)

boca grande, fl 33921 charlotte

CITY: ZIP: COUNTY:

NAME OF AGENCY:
boca grande community planning panel

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
panel member

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.
CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

FOR OFFICE USE ONLY:

COPY

ID Code
ID No.
Conf. Code
P. Req. Code

PDF 2006

****BOTH PARTS OF 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, 2006 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, 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 OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
IRA		retired
FICA		
Investments		

PART B - SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
see Part A			

PART C - REAL PROPERTY [Land, buildings owned by the reporting person]

Home at above address

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.

07/16/13/PM/0125 SHELL ee Co FI

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
MY WIFE AND I OWN AN INTEREST IN EVER ONE MILLION	WORTH OF STOCKS/BONDS. HOW MUCH DETAIL REQUIRED? PUBLICLY TRADED

PART E — LIABILITIES [Major debts]	
NAME OF CREDITOR	ADDRESS OF CREDITOR
none	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]			
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	NONE		
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): *Lynn K. Randall* DATE SIGNED (required): 4/3/07

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 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.

07AUG13PM0125 SDE Lee Co FL



LEE COUNTY
SOUTHWEST FLORIDA

FAX TRANSMITTAL

DEPARTMENT OF COMMUNITY DEVELOPMENT
Planning Division
Telephone (239) 479-8585

To: Bernie Feliciano
Fax #: 533-6310
From: Jim Mudd, AICP
Subject: Lyman Randall Form I

Date: August 3, 2007
Pages: 3, including
this cover sheet

Comments: This will be mailed to the Charlotte County Supervisor of Elections office.