FORM 1	STATEMENT C)F	2007			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTE	RESTS				
RAYMONE - ROBINAME - MIDDLE NA RAYMONE ROBINAME MAILING ADDRESS:	27 LAWRENCE	FOR OFFI USE ONLY	γ: •			
MAILING ADDRESS: 393 Dono	RA BLVd		ID Code			
CITY: Z FURT MY-IRS BARCH NAME OF AGENCY: TOUR OF FURT MY-ARBRES NAME OF OFFICE OR POSITION HELD O	IP: COUNTY: 33931 Lec Och Four Council R SOUGHT:		ID Code ID No. Conf. Code P. Req. Code			
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, 2007 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 NAME OF SOURCE OF INCOME	son]	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
SOCIAL SOCIATY	ADDRESS		Parment '			
LAHDINA RABLYY	ESTANO BLUL FOR + MYAN.	SBARCH R	PARLESTATE SALS			
KUN OF FERT MYAS BARCH		tour council				
	· · · · · · · · · · · · · · · · · · ·	es of income to bu DDRESS SOURCE	usinesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
						
PART C - REAL PROPERTY [Land, buildings owned by the reporting person] 3 23 Donur Blud / CRT MYANS BINCH FL 3 3 9 3/			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.			
4810 ROGUINA Rd RO 312 RATTI-BRAKE 181AA		INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.				
	d ALTON N.H		OTHER FORMS you may need to file are described on page 6.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
				12	
	٠.				
PART E — LIABILITIES [Major debts] NAME OF CREDITOR ADDRESS OF CREDITOR				REDITOR	
Chas & MURTGAGA LLC		PUBOX	B3000 DURA VI	41+ GA 30362	
BILLETHIR		425 HOO	47000 DURA VI	12 NH 03104	
	/ *			`	
				• .	
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]					
	BUSINESS ENT	ITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY				1	
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): 717-08					
FILING INSTRUCTIONS:					
WHAT TO FILE:	W	HERE TO FILE	≣: W	HEN TO FILE:	

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.

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 Blvd. 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.

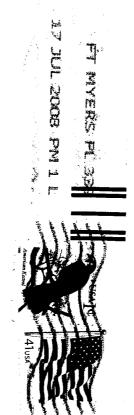
Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

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.



SUPERVISOR OF ELECTIONS P.O. BOX 2545 FORT MYERS FL 33902-2545



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