FORM 1 STATEMENT OF				2003		
Please print or type your name, mailing address, agency name, and position belo	FINANCIAL	INTERESTS				
LAST NAME FIRST NAME MIDDLE ROODE DONAL MAILING ADDRESS: 11177 LAKE CANC	o 4.	FOR OF USE ON		ode S		
CITY: FORT MYERS NAME OF AGENCY: LEE COUNTY PORT NAME OF OFFICE OR POSITION HE DEPT DIRECTOR CHECK IF CANDIDATE OR	ZIP: COUNTY: 339/3 LEE AVITION DOR SOUGHT: PLOPE ET LES NEW EMPLOYEE OR APPOIN	ITEE	}	Code q. Code		
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, 2003 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 ADDRESS		RCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
N/A						
PART B SECONDARY SOURCES OF BUSINESS ENTITY	F INCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to I ADDRESS OF SOURCE	businesse	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
				i.		
PART C REAL PROPERTY [Land, buildings owned by the reporting person]			and wh	G INSTRUCTIONS for when the state of the sta		
1 4 / 1/4			INSTF this for on pag	RUCTIONS on who must file rm and how to fill it out begin e 3.		
				R FORMS you may need to described on page 6.		

PART D — INTANGIBLE PERSO TYPE OF INTANGI	NAL PROPERTY [Stocks, bonds, certifile]	icates of deposit, etc.] BUSINESS ENTITY TO WHICH THE P	PROPERTY RELATES		
NIA					
PART E — LIABILITIES [Major debts] NAME OF CREDITOR ADDRESS OF CREDITOR			TOR		
SUNCORST SCHOOLS FCU FORT MYLRS F-1					
					
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	NA				
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):	nulo 2 Roode	DATE SIGNED (red	DATE SIGNED (required):		
FILING INSTRUCTIONS:					
WHAT TO FILE:	WHERE TO FII	 	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:

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.

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.

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 posi-

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.