FORM 1	STATE	EMENT OF	_	2002			
Please print or type your name, mailing address, agency name, and position below	FINANCIA	AL INTERI	ESTS				
Rothenberg, Hen- mailing address: 175 Bahia Viq		FOR OFFICE USE ONLY:	SUPERAL STORY				
CITY: Fort Myers Beach NAME OF AGENCY: Tort Myers Beach Mosquit NAME OF OFFICE OR POSITION HEL Commissioner - Se		ID Co	Code No. nf. Code Req. Code				
CHECK IF A CANDIDATE OR							
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, 2002 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 I		ne to the reporting person	 				
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS		ESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
Real Estate Sales	Century 21 A	AIM Realty ero Blud,	Rea	1 Estate Saler			
		Beach, FC 339	23/				
PART B - SECONDARY SOURCES NAME OF BUSINESS ENTITY	OF INCOME [Major customers, of NAME OF MAJOR SOURCE OF BUSINESS' INCOME	clients, and other sources		PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
NAME OF	NAME OF MAJOR SOURCE	clients, and other sources	of income to busine	PRINCIPAL BUSINESS			
NAME OF	NAME OF MAJOR SOURCE	clients, and other sources	of income to busine	PRINCIPAL BUSINESS			
NAME OF	NAME OF MAJOR SOURCE	clients, and other sources	of income to busine	PRINCIPAL BUSINESS			
NAME OF	NAME OF MAJOR SOURCE OF BUSINESS' INCOME buildings owned by the reporting	clients, and other sources ES ADD OF Si	of income to busine PRESS OURCE FIL and ed Myers this on	PRINCIPAL BUSINESS			

PART D INTANGIBLE PERSON TYPE OF INTANGIB	NAL PROPERTY (Stocks	s, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
111200 1111110				up in the		
				R S		
				C. Ohmore		
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
NAME OF GREDITOR		A SECTION				
PART F — INTERESTS IN SPECI	FIED BUSINESSES [OV	vnership or positi	ons in certain types of businesses]			
NAME OF	BUSINESS ENTI	TY # 1	BUSINESS ENTITY # 2	BUSINESS 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						
IF ANY OF PARTS	A THROUGH F ARE	E CONTINUE	D ON A SEPARATE SHEET,	PLEASE CHECK HERE		
SIGNATURE (required): 9/2/03						
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.

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.

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.