FORM 1	STATEM	ENT OF	2007	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS		
LAST NAME FIRST NAME MIDDLE N Schivinski - Ja MAILING ADDRESS :	ames - Andrew	FOR OI USE OI		
GILSE 11th st	reet		ID Code	
Suite A	ZIP : COUNTY :		JUN1	
Cape coral a	33990 Lee		ID No.	
NAME OF AGENCY : Lee County Construction NAME OF OFFICE OR POSITION HELD	Tradustry Lioansing	Board /	ID Code OB IUN1.3PM0337 Conf. Code Conf. Code CO P. Req. Code EL	
Board member				
You are not limited to the space on the lines CHECK ONLY IF CANDIDATE O		N N	Co F1	
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: SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: 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): OR OR DOLLAR VALUE THRESHOLDS				
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME	DME [Major sources of income to the SOUF	RCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Engineering + Design	611 SE 11th St	reat Suite A	Engineering Firm	
Consultants, Inc.	Cape coral FI	- 33990	3	
	NCOME [Major customers, clients, a NAME OF MAJOR SOURCES OF BUSINESS' INCOME	nd other sources of income to ADDRESS OF SOURCE	businesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
Portofino Homas, Inc.		611 se 11th st	SteA Home Builder	
		Cape coral, FL	33190	

PART C REAL PROPERTY [Land, build See Altached	dings owned by the reporting person]	FILING INSTRUCTIONS for when and where to file this form are locat- ed 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.	

PART D — INTANGIBLE PERSONAL PROPERTY TYPE OF INTANGIBLE				
Stock	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES Engineering + Design Consultants, Inc.			
	Portofino Homes, Inc.			
<u></u>				
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	ADDRESS OF CREDITOR			
PART F INTERESTS IN SPECIFIED BUSINESSE	[Ownership or positions in certain types of businesses]			
BUSINESS	ENTITY # 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 PARIS A THROUGH F	ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE			
SIGNATURE (required):				
	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.	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. WHEN TO FILE: <i>Initially</i> , each local officer/employee, state officer, and specified state employee must fil <i>within 30 days</i> of the date of his or he appointment or of the beginning of employ			
If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).	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			
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	 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 for publicly-elected local officer 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 			

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.

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.

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.

Part C – Real Property

3807 San Carlos Saint James City, FL 33956

3122 Chiquita Blvd N Cape Coral, FL 33993

2716 Van Buren Pkwy Cape Coral, FL 33993

1246 NW 22nd Pl Cape Coral, FL 33993

611 SE 11th St Cape Coral, FL 33990

3106 Chiquita Blvd S Cape Coral, FL 33914

3118 Chiquita Blvd S Cape Coral, FL 33914

4003 NE 19th Ave Cape Coral, FL 33909

1814 NE 42nd Terr Cape Coral, FL 33909

3524 NE 20th Pl Cape Coral, FL 33909

227 Blackstone Dr Ft Myers, FL 33913

Chiquita Blvd S Cape Coral, FL 33914

3114 Chiquita Blvd S Cape Coral, FL 33914

2509 Eighth Ave Saint James City, FL 33956