FORM 1		STATEMEN	2001								
Please print or type your name, malling ddress, agency name, and position below: FINANCIAL INTERESTS											
LAST NAME — FIRST NAME — MIDDLE SCHNENDERMAN — MA	FOR OFFIC										
MAILING ADDRESS: 14665 CANARY IS				(0							
BONITA SPRINGS		ID Code	•	SUPERVISOR	2003 JAN	7 3					
CITY: LAGUNA LAKES COMMUNITU		ID No.		NSOR	EN 3						
NAME OF AGENCY: BOARD OF SUPERVISORS		Conf. (Code	£. r	.Tor						
NAME OF OFFICE OR POSITION HEL		P. Req	. Code	· ·							
CHECK IF CANDIDATE OR					∞						
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, 2001 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: 12/31/02											
MANNER OF CALCULATING REPORTABLE INTERESTS: PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VALUES. BEGINNING IN 2001, THE LEGISLATURE HAS ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS (old method) OR DOLLAR VALUE THRESHOLDS (new method)											
PART A PRIMARY SOURCES OF I NAME OF SOURCE OF INCOME]			N OF THE S							
TRANSEASTERN PROPERTIES 3300 UNIVERSITY DRIVE				PRINCIPAL BUSINESS ACTIVITY BESIDENTIAL BUYUNER							
		CORAL SPRINGS FL	33065		·						
						· · · · · · · · · · · · · · · · · · ·					
PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY	NAM	ME [Major customers, clients, and o E OF MAJOR SOURCES F BUSINESS' INCOME	ADE	of income to DRESS OURCE	business	P	by the reportance of the control of	BUSIN	IESS		
NONE											
											
	s de la Sala de La										
PART C REAL PROPERTY [Land, buildings owned by the reporting person]					FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.						
hesipence - 246 Bon	N	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 PERSO TYPE OF INTANGI		ocks, bonds, certifica	ates of deposit, etc.) BUSINESS ENTITY TO WHICH	I THE PROPERTY RELATES					
None									
PART E — LIABILITIES [Major on NAME OF CRED		1	ADDRESS O	F CREDITOR					
Country wine Home Logues		PO BOY (PO BOX 660694 DALLAS, TX 15266-0694						
Monthly wine freme walks		10.00	TO MAN POWER TO THE TOTAL OF TH						
PART F — INTERESTS IN SPEC	IFIED BUSINESSES	(Ownership or posit	tions in certain types of businesses	1					
NAME OF	BUSINESS E	ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3					
NAME OF BUSINESS ENTITY	HONE								
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 CONTINUI	ED ON A SEPARATE SHE	ET, PLEASE CHECK HERE					
SIGNATURE (required):	us. Will	uduu	DATE S	IGNED (required): 1/28/03					
		FILING IN	ISTRUCTIONS:						
WHAT TO FILE: After completing all parts of thi signing and dating it, send ba	s form, including ack only the first	If you were maile	WHERE TO FILE: If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections officer, and specified state employee must file						

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.

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.

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.