FORM 1	STATEM		2004				
Please print or type your name, mailing address, agency name, and position belo	FINANCIAL	INTERESTS					
MAILING ADDRESS :	ENAME: AYMOND LLO CHAELS TLACE	FOR OI USE OF					
CITY:		LEE	D No.	3			
NAME OF AGENCY: 'LEE COOTY L NAME OF OFFICE OR POSITION HEI	LD OR SOUGHT :	ACTENCY	P. Red gode 19	C)			
CHECK ONLY IF (CANDIDATE	OR NEW EMPLOYEE OR A	PPOINTEE					
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, 2004 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							
NAME OF SOURCE OF INCOME	AT A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE OF INCOME ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
PART B SECONDARY SOURCES OF BUSINESS ENTITY	OF INCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	PRINCI	ses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
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.							
1075 8+9, BL9, UNT LOTS 12+13, BL 118,	4 SOTH R 26 EAST R 26 EAST 44 SOTT R 26 EAST	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.					
Littlet Acilos		OTHER FORMS you may need to					

The state of the s						
PART D — INTANGIBLE PERSO TYPE OF INTANGI	-	ks, bonds, certific	• • •	ICH THE PROPERTY RELATES		
TICLE		SCHUMA	1			
Managesth Integs		Cayjo	n Holdings, Lli	<i>C</i>		
			J			
	÷					
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
5/3 Bank		goed Benuth Beach Rd, Benuth Springs FL 34135				
Commonity	BANK OF A	APLES 94	30 BORNA BEACH Rd, 1	Genira Springs FL 34135		
CHASE MORTGACIE		APLES 9430 BOOKA BEACH Rd, BONKA SPRINGS, FL 34135 P.O. BOX 90001871 LOUISVILLE, KY 40290-1871				
		<u> </u>				
PART F — INTERESTS IN SPECI	FIED BUSINESSES [O	wnership or position	ons in certain types of businesses	s]		
	BUSINESS ENT	ITY#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): 6/22/05						
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: Initially, each local officer/employee, state employee might file within 30 days of the date of his or to that location. I contesting the provided that the form to that location.						

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.

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 Boulevard, 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.

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.