FORM 1 F	FINAL STA	TEMENT OF		2008	
	FINANCIAL	INTERESTS			
(TO BE FILED WI	THIN 60 DAYS OF LEAV	ING PUBLIC OFFIC	E OR I	EMPLOYMENT)	
LAST NAME - FIRST NAME - MIDDL SCHWAN, CHIG	NAME OF REPORTING PERSON'S AGENCY: CANTIVA COMMNIZ PANEC				
1302 PAR VIS	CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):				
SANIBEL ZIP: SANIBEL 33	3957 LEE	LIST OFFICE OR POSITION HELD:			
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS MY FIN OFFICE OR EMPLOYMENT DESCRIBE MANNER OF CALCULATING REP THE LEGISLATURE ALLOWS FILERS T FEWER CALCULATIONS, OR USING O further details. PLEASE STATE BELOW	ED ABOVE, WHICH DATE WAS CORTABLE INTERESTS: THE OPTION OF USING REPORTING COMPARATIVE THRESHOLDS, WH W WHETHER THIS STATEMENT RE	OD BETWEEN JANUARY 1, 20 4 3 0 0 8 THRESHOLDS THATARE BS ICH ARE USUALLY BASED OF FLECTS EITHER (check one):	008 ND TH 200	8. (Datempst to rior p 12/31/08) DLLAR VALUES, VHICH REQUIRES TABLE VALUES (see instructions for	
PART A PRIMARY SOURCES O NAME OF SOURCE OF INCOME		DME [Major sources of income to the reporting person] SOURCE'S ADDRESS 5400 PUNTATON PKIK (WITIVA FL 33924		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY SMALY - MATAGING PIRCOM	
PART B SECONDARY SOURCE NAME OF BUSINESS ENTITY	S OF INCOME [Major customers, of NAME OF MAJOR SOURCES OF BUSINESS' INCOME	clients, and other sources of inc ADDRESS OF SOURCE	ome to bus	nesses owned by 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. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.		
				ER FORMS you may need to e described on page 6.	

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]								
INVESTMENT MUDIN FUNDS		E-THAC FINANCIAL - 48%						
CAUINES		BUNTIXIMIR STOLAS - 1906						
ASTINANT APCONT		FRUSTA INVESTMENTS - 33°6						
pression for the second								
			<u></u>	n <u>e. 189</u> . 1999. 1999. 1999. 1997. 1997.				
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR						
NA		~						
	······································			<u></u>				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]								
NAME OF	BUSINESS EN	TITY # 1	BUSINESS ENTITY # 2	2 BUSINE	SEENTITY#3			
BUSINESS ENTITY ADDRESS OF				/*	-/			
BUSINESS ENTITY PRINCIPAL BUSINESS					· <u> </u>			
ACTIVITY POSITION HELD			· · · · · · · · · · · · · · · · · · ·					
OWN MORE THAN A 5%			<u> </u>					
IF ANY OF PARTS A 1	HROUGHEFAR	E CONTINUE	D ON A SEPARATE SHE	ET, PLEASE CHECK	HERE			
SIGNATURE:	16/	$\checkmark$	DATE S		08			
				//				
FILING INSTRUCTIONS:								
		HERE TO FILE:		NOTE: If you are leaving office or employment				
After completing all parts of t pages 1 and 2, including signing a	Local officers:file with the Supervisor of bections of the county in which you perma- ntly reside.If you are leaving office or employment during the first half of 2008, you may not have filed Form 1 for 2007. In that case,							
send back only pages 1 and 2 for need not return any of the instruct	Florida, file with	the Supervisor of the county	this is not the last for	m you will file, even				
Facsimiles will not be accepted.	w		has its headquarters.) or specified state employ-	though the Form 1F co of your term of office of				

## WHEN TO FILE:

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

ees: 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.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

will be required to file Form 1 for 2007 by July 1 of 2008.

Sheraton Fisherman's Wharf

2500 Mason Street San Francisco, California 94133

02 1P **\$ 000,420** 0003061185 SEP 16 2008 MAILED FROM ZIP CODE 94133

UNITED GALTES POS

LEE COUNTY SUPPLIESAL OF EUROPIALS f.o. Box 2545 FT. Mybus, FL 33902

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