FORM 1	STATEMI	ENT OF	2005
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	
LAST NAME FIRST NAME MIDDLE NAME: SMITH ROXAND LEE MAILING ADDRESS! 21521 MADERA RD.			FICE
FORT MYERS BEAC CITY: LEE COUNTY TOU NAME OF AGENCY:	CH, FI, 33931 COUNTY: RET DEVELOPMENT VICE CHAIR R SOUGHT:		ID No. Conf. Code Reg Code
CHECK ONLY IF CANDIDATE OR	□ NEW EMPLOYEE OR AP	POINTEE	
A FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2005 MANNER OF CALCULATING REPORTAB THE LEGISLATURE ALLOWS FILERS TI REQUIRES FEWER CALCULATIONS. OR	WHETHER THIS STATEMENT IS OR SPECIFY LE INTERESTS: HE OPTION OF USING REPORT USING COMPARATIVE THRESH	ECEDING TAX YEAR, WHETH FOR THE PRECEDING TAX Y TAX YEAR IF OTHER THAN T TING THRESHOLDS THAT A HOLDS, WHICH ARE USUAL	HER BASED ON A CALENDAR YEAR OR ON YEAR ENDING EITHER (check one): THE CALENDAR YEAR: ARE ABSOLUTE DOLLAR VALUES, WHICH LY BASED ON PERCENTAGE VALUES (see
instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS COMPARATIVE (PERCENTAGE) THRESHOLDS OR			R (check one): DOLLAR VALUE THRESHOLDS
PART A PRIMARY SOURCES OF INCO NAME OF SOURCE OF INCOME	ME [Major sources of income to th	RCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
NATIONS FUNDS	POBOX 286 BOX NEW YORK, N. Y BOX 9654 PROVIDANCE RE	UNICEEN STATIO 10774-0286 08940-9654	
RAYKOND JAMES	SOC CORSLON PER ST. PETERSBUR	6,F1.33933-774	9 INVESTMENT BROKERACE
	NCOME [Major customers, clients, a NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
PINIC SHELL DEVELORIZE	T SEASONAL RENTA	FORTMYERS BE	RESORT DEVELO SEASON REPTAL GLH, P(3343)
BAY HARBOR	k '1	1) /(//	11 11 11 11 11 11 11 11 11 11 11 11 11
PART C REAL PROPERTY [Land, build 309 ESTERD BLUD 319 ESTERD BLUD 325/327 ESTERD BLUD	<i>Fa</i>	12 14 14 14 14 14 14 14 14 14 14 14 14 14	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.
394 ESTERO BLUD IS 5370 ESTERO BLUD IS	AND SHERES 506+50)	11 12 12 12	OTHER FORMS you may need to file are described on page 6.

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1-145TON WAX — HOUDTHN OABIN

MURPHY WORTH CARDINA

PART D — INTANGIBLE PERSON	IAL PROPERTY [Stocks, bonds, o	certificates of deposit, etc.]	5		
TYPE OF INTANGIB		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
CARIOUS STOCKS +0	BOND FUNDS	NATIONS SECUPITIES			
MUNICUPAL INCOME TRUSTS		RAMOND JAMES			
PROFIT SHARIN					
	,		,		
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR			
HORTGACES		BANK OF AMERICA			
LOAN		WACHOVIA BANK			
/		WILLIAM	DITNIC		
DART F INTERESTS IN SPECIFIE	ED BUSINESSES (Ourporchip or	positions in certain types of businesses]			
1 ANT 1 - INTERCOTO IN OF EON IN					
NAME OF	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
BUSINESS ENTITY ADDRESS OF					
BUSINESS ENTITY		,			
PRINCIPAL BUSINESS ACTIVITY		NIA			
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					
IF ANY OF PARTS A 1	THROUGH F ARE CONTIN	IUED ON A SEPARATE SHEET, PL	EASE CHECK HERE		
SIGNATURE (required):	00-0	DATE SIGNED			

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.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be 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 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.

FILING INSTRUCTIONS:

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; 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.

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.

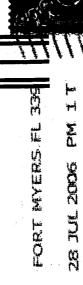
Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

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.



ROXIE SMITH 21521 MADERA RD. FT. MYERS BEACH, FL 33931



SUPERVISOR OF ELECTIONS P.O. BOX 2545 FORT MYERS FL 33902-2545