

COPY

**SHARON L. HARRINGTON
SUPERVISOR OF ELECTIONS
LEE COUNTY - FLORIDA**

<u>PHYSICAL ADDRESS</u>	<u>MAILING ADDRESS</u>
LEE COUNTY CONSTITUTIONAL COMPLEX 2480 THOMPSON STREET 3 RD FLOOR FORT MYERS FL 33901	please send all correspondence to this address P O BOX 2545 FORT MYERS FL 33902-2545
MAIN OFFICE 239 LEE VOTE 239-533-8683	FAX 239-533-6310 WEBSITE www.leeelections.com

111481298

SOPER, LEONARD M
1553 MAPLE DR
FORT MYERS FL 33907

TO: Departing Local Officer
FROM: Bernie Feliciano, Qualifying Officer
DATE: May 22, 2008
SUBJECT: Form 1 Statement of Financial Interests for Year Ending 12-31-2007

We are in receipt of your **FORM 1F-FINAL** Statement of Financial Interests for 2008 that covers a portion of your service as a local officer for the year 2008. Lee County financial disclosure filing records indicate that the last date you held public office or employment was in 2008.

Enclosed is a **STANDARD** Form 1, Statement of Financial Interests for 2007, to complete and return in order to satisfy your obligation to file financial disclosure for the year 2007 (year ending 12-31-2007).

Persons serving as of December 31, 2007 (along with those officials elected in 2007 whose terms began in 2008) are STILL required to file in 2008 for the year ending 12-31-2007. Even if you left the your position in 2008, you are required to file financial disclosure for 2007 on the enclosed form.

IT IS IMPORTANT THAT YOU RETURN YOUR COMPLETED FORM 1 STATEMENT OF FINANCIAL INTEREST IMMEDIATELY [REDACTED] WITH THE LEE COUNTY SUPERVISOR OF ELECTIONS AND AVOID FUTURE MAILINGS AND/OR A FINE FOR A LATE FILING.

WHEN TO FILE: By July 1, 2008

Persons who fail to file the annual disclosure form by September 1st are subject to automatic fines of \$25.00 for each late day up to \$1,500.

WHERE TO FILE: Please return the completed ORIGINAL form, including signature and date in the enclosed postage-paid return envelope to: LEE COUNTY ELECTIONS OFFICE, POST OFFICE BOX 2545, FORT MYERS FL 33902-2545. THE ROLE OF THE SUPERVISOR OF ELECTIONS IS TO RECEIVE AND MAINTAIN THE FINANCIAL DISCLOSURE FORM AS A PUBLIC RECORD.

QUESTIONS?: HOW DO I COMPLETE THE FORM? Instructions for completing this form are included in this mailing. Any questions regarding the instructions or the form should be directed to the office of the Florida Commission on Ethics at 1-850-488-7864.

Thank you for your cooperation and prompt attention to this matter.

Enclosures: Form 1 Statement of Financial Interests/Postage Paid Return Envelope

FINAL STATEMENT OF FINANCIAL INTERESTS

2008

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

LAST NAME — FIRST NAME — MIDDLE NAME:

Soper, LEONARD

NAME OF REPORTING PERSON'S AGENCY:

NDC - Pine Manor

MAILING ADDRESS:

1553 Maple Dr.

CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):

- ☐ LOCAL OFFICER ☐ STATE OFFICER
☐ SPECIFIED STATE EMPLOYEE

CITY:

ZIP:

COUNTY:

Ft. Myers, FL

33907

Lee

LIST OFFICE OR POSITION HELD:

District Committee

BOTH PARTS OF THIS SECTION MUST BE COMPLETED

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2008 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS 2008. (Date must be prior to 12/31/08)

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 ☒ DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Social Security	Fed. Gov. U.S.	retired
Pension - AFLCIO		

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
	N/A		

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]

1553 Maple Dr.	Ft. Myers, FL
1811 Maple Dr.	Ft. Myers FL

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.

OTHER FORMS you may need to
file are described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]

TYPE OF INTANGIBLE

BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

N/A	

PART E — LIABILITIES [Major debts]

NAME OF CREDITOR

ADDRESS OF CREDITOR

N/A	

PART F — INTERESTS IN SPECIFIED BUSINESSES [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	N/A		
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:

Leonard M. Soper

DATE SIGNED:

*4-7-08***FILING INSTRUCTIONS:****WHAT TO FILE:**

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only pages 1 and 2 for filing (you need not return any of the instruction pages).
Facsimiles will not be accepted.

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.

WHERE TO FILE:

Local officers: file with the Supervisor of Elections of the county in which you 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.

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

NOTE:

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, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2007 by July 1 of 2008.