FORM 1	STATEM	STATEMENT OF		2011		
	Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERESTS					
LAST NAME - FIRST NAME - MIDE Southwich Christin Mailing address :	a Stahl	FOR O USE O	NLY:	12.1		
2262 Verdmor	nt Ct					
			12 0000	90 D0		
Cape Coral	ZIP: COUNTY: FL_LCC		ID No.	SOF L		
NAME OF AGENCY : CEM COMMUNITU NAME OF OFFICE OR POSITION H	Development Distri	J	Conf. Code P. Reg. Cod			
Sizervisor	SUPERVISOR					
	lines on this form. Attach additional sheets OR NEW EMPLOYEE OR A					
**** 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 (must check one):         Image: Colspan="2">DECEMBER 31, 2011         Image: Colspan="2">OPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:						
REQUIRES FEWER CALCULATIONS	RS THE OPTION OF USING REPOR 6, OR USING COMPARATIVE THRESH 5E STATE BELOW WHETHER THIS ST/	IOLDS, WHICH ARE USUALL ATEMENT REFLECTS EITHER	Y BASED ON F	PERCENTAGE VALUES (see ne):		
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")						
NAME OF SOURCE				ION OF THE SOURCE'S		
Windham/Magnolialan	dingul 3501 Quenida bel Vera 1	10 3501 Quenida Lel Kra NFIMyers FL 33917 God		Development		
Magnetia Landing Boat	y/IC 3501 avenicla del Vera	C 3501 avenicla del Vera NAMIPUS & 33917 Peal Esto		e Sales + Rentals		
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions p. 4] (If you have nothing to report , you must write "none" or "n/a")						
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	ļ	PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
None						
PART C REAL PROPERTY // and	buildings owned by the reporting person	- See instructions n 41	<u>_</u>			
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")			when and wh	STRUCTIONS for nere to file this form at the bottom of page 2.		
				TIONS on who must and how to fill it out ge 3.		
				ORMS you may need scribed on page 6.		

PART D — INTANGIBLE PERSONAL PROPERTY (If you have nothing to report, you m			ictions p. 5]		
TYPE OF INTANGIBLE	}	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
None					
		; <u></u> _,;			
PART E — LIABILITIES [Major debts - See instruct (If you have nothing to report, you m					
NAME OF CREDITOR	1	ADDRESS OF CREDITOR			
None					
PART F — INTERESTS IN SPECIFIED BUSINESSE	S [Ownership or positi	ons in certain types of businesses	s - See instructions p. 5]		
(If you have nothing to report, you mus BUSI	it write "none" or "n/a" NESS ENTITY # 1	") BUSINESS ENTITY #			
NAME OF BUSINESS ENTITY MAGADIC			 0		
	d kra NFr Mus 3317				
	Salesshantas				
	Broker				
I OWN MORE THAN A 5%	DIDLC				
NATURE OF MY					
OWNERSHIP INTEREST		D ON A SEPARATE SHE			
			NED (required):		
SIGNATURE (required):					
Christing Southnick 5/26/2012					
		STRUCTIONS:			
WHAT TO FILE:	WHERE TO		WHEN TO FILE:		
After completing all parts of this form, including	If you were mailed	the form by the Commission	Initially, each local officer/employee, sta		
signing and dating it, send back only the first sheet (pages 1 and 2) for filing.	your annual disclos	nty Supervisor of Elections for sure filing, return the form to	officer, and specified state employee mu file within 30 days of the date of his or h		
If you have nothing to report in a particular	that location.	<b>loyees</b> file with the Supervisor	appointment or of the beginning of employment Appointees who must be confirmed by the Sena		
section, you must write "none" or "n/a" in that section(s).	of Elections of the co	ounty in which they permanently not permanently reside in	must file prior to confirmation, even if that is lead than 30 days from the date of their appointment		
	Florida, file with th	he Supervisor of the county has its headquarters.)	Candidates for publicly-elected local office mu file at the same time they file their qualifying		
NOTE: MULTIPLE FILING UNNECESSARY:	State officers or	specified state employees	papers.		
Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a	15709, Tallahasse	file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite			
second Form 1 for the same year. However, a candidate who previously filed Form 1 because of	201, Tallahassee, F	L 32312.	year in which they hold their positions.		
another public position must at least file a copy of his or her original Form 1 when qualifying.	Candidates file the qualifying papers.				
	To determine what under, see the "W	o determine what category your position falls inder, see the "Who Must File" instructions on of leaving office or employment. How			

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

Facsimiles will not be accepted.

a CE Form 1F (Final Statement of Financ Interests) does not relieve the filer of filing

CE Form 1 if he or she was in their position

December 31, 2011.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")							
		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
None_							
PART E — LIABILITIES [Major debts - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")							
	OR	ADDRESS OF CREDITOR					
None							
			<u>د</u>				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3							
NAME OF BUSINESS ENTITY	MagndiaLandingReeltill		6				
ADDRESS OF BUSINESS ENTITY	3501 avenda Id Kira N FM 445 3517						
PRINCIPAL BUSINESS ACTIVITY	RecilEstate Salesonuntas						
POSITION HELD WITH ENTITY	Clinks / Brokes		0 H				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100						
NATURE OF MY OWNERSHIP INTEREST							
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required): DATE SIGNED (required):							

## 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.

AinG

rethuck

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

#### 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:

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.

Facsimiles will not be accepted.

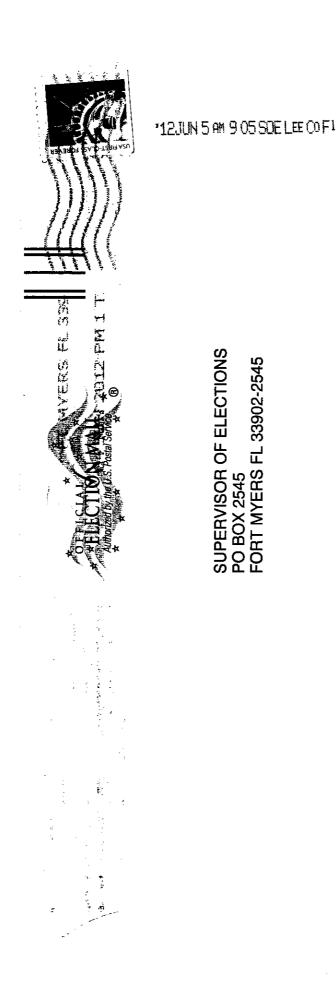
### WHEN TO FILE:

*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. However, filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.



SUPERVISOR OF ELECTIONS PO BOX 2545 FORT MYERS FL 33902-2545

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