FORM 1		STATEM	MENT OF		2011	
Please print or type your name, mailing address, agency name, and position below.	ow:	<b>FINANCIAI</b>	LINTEREST	S		
SOUTHWICK Chyis MAILING ADDRESS:	LE NAME 17100	Stanl		OFFICE ONLY:		
2462 Verdine	ent C	<i></i>		 I ID C	ide i	
CITY: COPE COLUMN NAME OF AGENCY:	ZIP:	county: 3991 Lee	4-1-4-1-4-1	ID N	W 31a	
CFM '				Con	f. Code	
NAME OF OFFICE OR POSITION HE	ELD OR S	SOUGHT ;		■ P. R	eq. Code	
You are not limited to the space on the li	ines on thi OR	is form. Attach additional sheet  NEW EMPLOYEE OR A			2011.1901 Form 1	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR A FISCAL YEAR. PLEASE STATE BEI DECEMBER 31, 2011 MANNER OF CALCULATING REPOR THE LEGISLATURE ALLOWS FILER REQUIRES FEWER CALCULATIONS instructions for further details). PLEAS	FINANCI LOW WHI TABLE II S THE (	AL INTERESTS FOR THE PRETHER THIS STATEMENT IS  OR SPECIFY  NTERESTS:  DPTION OF USING REPORTING COMPARATIVE THRES	FOR THE PRECEDING TAX TAX YEAR IF OTHER THAN RTING THRESHOLDS THAT HOLDS, WHICH ARE USUA TATEMENT REFLECTS EITHE	THER BASI YEAR ENI THE CALE ARE ABSI	ED ON A CALENDAR YEAR OR ON DING EITHER (must check one):  ENDAR YEAR:  OLUTE DOLLAR VALUES, WHICH DON PERCENTAGE VALUES (see	
COMPARATIVE (PERCENTAGE PART A PRIMARY SOURCES OF I			<u> </u>		RESHOLDS	
(If you have nothing to report, you must write "none" or "n/a")  NAME OF SOURCE  SOURCE'S			")	_	SCRIPTION OF THE SOURCE'S	
WINCHEST MUCHOLICA LANGUA ELC		ADDRESS  Hill (Livericia Sel Vera		PRINCIPAL BUSINESS ACTIVITY GOLF COURSE		
white ham/Mugnetia landing LC		North Gart Myers & 33917			- SIMP COOK > -	
		<u> </u>				
PART B SECONDARY SOURCES [Major customers, clients, (If you have nothing to re	and other		sses owned by the reporting p	erson - See	e instructions p. 4]	
NAME OF BUSINESS ENTITY		E OF MAJOR SOURCES BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
Magnatice Lancting Roalfylle DR		lter ton	13880 Treeline are		New Besidential Construction	
		F+Myes F 3		3		
/	buildings port, you	owned by the reporting personust write "none" or "n/a"	on - See instructions p. 4]	when	IG INSTRUCTIONS for and where to file this form	
Mone				INST	RUCTIONS on who must is form and how to fill it out on page 3.	
				OTHI to file	ER FORMS you may need are described on page 6.	

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")						
TYPE OF INTANGIBL	•	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
None		been made and the second				
_						
PART E — LIABILITIES [Major debts - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a")						
NAME OF CREDITO	OR	ADDRESS OF CREDITOR				
vene						
			м р.:			
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						
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY	Jonk		8			
ADDRESS OF BUSINESS ENTITY			DSDE LEB (OF			
PRINCIPAL BUSINESS ACTIVITY			<u> </u>			
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 (require	<u>ed):</u>	DATE SIGNED (r	required):			
Christina,	& Southwest.	7/28/3	7/28/2017			
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 filling.

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.

### 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 inwhich 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.

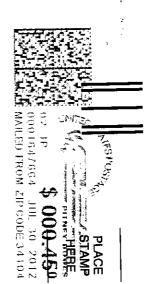
Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

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.

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THE RONTO GROUP 3185 HORSESHOE DRIVE S. NAPLES, FL 34104





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

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