FORM 1	STATEM	STATEMENT OF		2011	
Please print or type your name, mailing address, agency name, and position below	] FINANCIAI	<b>INTERESTS</b>	S		
LAST NAME FIRST NAME MIDDLE NAME :  FOR OFFICE USE ONLY:					
MAILINC	111509576			<u> </u>	
SPEAR, JOHN DOUGLAS  25720 CREEKBEND DR BONITA SPRINGS FL 34135  CITY:  NAME OF AGENCY:  CITY of Bonnta Springs FC  NAME OF OFFICE OR POSITION HELD OR SOUGHT:  COUNCIL Member				21A) 184	
CITY:			ID I	40. 40.	
	unta Springs	EL	Con	f. Code	
NAME OF OFFICE OR POSITION HELD OR SOUGHT:  P. Req. Code					
You are not limited to the space on the lines	s on this form. Attach additional sheets	s, if necessary.		p-al	
CHECK ONLY IF CANDIDATE	OR NEW EMPLOYEE OR A	PPOINTEE			
**** 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):  DECEMBER 31, 2011 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:					
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 (must check one):  COMPARATIVE (PERCENTAGE) THRESHOLDS  OR  DOLLAR VALUE THRESHOLDS					
PART A PRIMARY SOURCES OF INC (If you have nothing to repo	OME [Major sources of income to the rt, you must write "none" or "n/a")		ctions p.	4]	
NAME OF SOURCE OF INCOME	•	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Law Offices of John D	Spar PA 9420 Bon	* PA 9420 Bonda Beach. Rd		Roal estate afterney	
	Suit = 10				
	Bonda '	Springs, [34135			
	INCOME to ther sources of income to business ort, you must write "none" or "n/a"		son - See	e instructions p. 4]	
NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
None					
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")			FILING INSTRUCTIONS for when and where to file this form		
which own & 9470 Bonde Boach Rd.				cated at the bottom of page 2.	
Bonite Springs FC 34/35				RUCTIONS on who must is form and how to fill it out on page 3.	
170 NIC	4111.093, 72 3 1.12	>	_	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 INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
Corporat + stock	Law Offices of John O. Speer, PA.				
Partnership Interest	Beach Rod Partners LLP.				
Retirement (401K) Demainder int. intruct	Beach Rod Partners LLP. Law Offices of John D. Spear, P.A.401K Charlotte Spear Living Trust				
PART E — LIABILITIES [Major debts - See instr (If you have nothing to report, you					
NAME OF CREDITOR	ADDRESS OF CREDITOR				
RB(Bank (PNC-3/5/12)	POBOX 1070, Charlotto, N.C.				
George Spour	617 barden Court Quinay BL.				
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 "r/a")					
	SINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3				
	Sohn Spoor PA Bouch Rd, Rethors LLP				
ADDRESS OF BUSINESS ENTITY 3420 13	BIL. #100 9420 Bonte Beach Rd				
PRINCIPAL BUSINESS ACTIVITY Law Pr	action Owns office holy				
POSITION HELD WITH ENTITY Pres. 10	Worl Att'y) Party or				
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	405				
NATURE OF MY	owner 40% owner.				
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.

( Joh D. Sh

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:**

## 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.

Facsimiles will not be accepted.

## WHEN TO FILE:

5/14/2012

Initially, each local officer/employee, state officer, and specified state employee mufile within 30 days of the date of his or he appointment or of the beginning of employmer Appointees who must be confirmed by the Senamust file prior to confirmation, even if that is lest than 30 days from the date of their appointment.

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

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

Finally, at the end of office or employment each local officer/employee, state officer, as specified state employee is required to file final disclosure form (Form 1F) within 60 day of leaving office or employment. However, filing a CE Form 1F (Final Statement of Finance Interests) does not relieve the filer of filling CE Form 1 if he or she was in their position of December 31, 2011.

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LAW OFFICES OF JOHN D. SPEAR, P.A.

ATTN: ALEXIS

9420 BONITA BEACH ROAD, SUITE 100 BONITA SPRINGS, FL 34135

## \$ POST | STATE | ST

PS Form 3800, 6/2002

LEE COUNTY SUPERVISOR OF ELECTIONS 2480 THOMPSON STREET FORT MYERS FL 33901

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