FORM 1	STATI	EMENT OF		2003			
Please print or type your name, mailing address, agency name, and position belo	FINANCI	AL INTEREST	rs 🗍				
LAST NAME FIRST NAME MIDD.  Spurgeon - Mark - MAILING ADDRESS:			R OFFICE E ONLY:				
P.O. Box 132			$\sqrt{\frac{1}{100}}$	ahe			
CITY: ZIP: COUNTY: Boca Grande 33921 LEE  DNAME OF AGENCY: Boca Grande Fire control District Boca Grande Fire Confrol District NAME OF OFFICE OR POSITION HELD OR SOUGHT: Secretary, Treasurer Panel member							
CHECK IF CANDIDATE OR	NEW EMPLOYEE OR A	PPOINTEE					
**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 (check one):  DECEMBER 31, 2003  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 (check one):							
COMPARATIVE (PERCENTAGE		<u>QR</u> □	DOLLAR	VALUE THRESHOLDS			
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]  NAME OF SOURCE  OF INCOME  ADDRESS				DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
Boca Grande Real Estate In P.O. Box 686, Boca Grande Fl 3372			121 Real	Real Estate Brokerage			
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]  NAME OF NAME OF MAJOR SOURCES ADDRESS PRINCIPAL BUSINESS BUSINESS ENTITY OF BUSINESS' INCOME OF SOURCE ACTIVITY OF SOURCE							
Boca Commercia Partner US. Postal Service		e 390 park Ave Boca Gra	390 park Ave Boca Grande Commercial Rental				
PART C REAL PROPERTY [Land, buildings owned by the reporting person]  Commercial Aldy 360 park Avenue  Commercial Aldy 360 park Avenue  Commercial Aldy 360 park Avenue			and w	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.			
Commercial Bldg & 2 vac. vacant Land Lot 22 A		INSTRUCTIONS on who must file					
85 Acres Hay 231	on pag	orm and how to fill it out begin ge 3.					
•			OTH	OTHER FORMS you may need to			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]  TYPE OF INTANGIBLE  BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
			. ,			
		<del></del>	<u> </u>			
DARTE _ I IARN ITIES [Major	dobtol					
PART E — LIABILITIES [Major debts]  NAME OF CREDITOR		ADDRESS OF CREDITOR				
Washington Mutual		1505 S. Tamami TR. STE 402 Venue, FL 3				
SouthTrust Bank		1505 S. Tamiami TR. STE 402 Venice R 3. 699 Rotunda Blud W., Rotunda FL 33947				
PART F — INTERESTS IN SPEC	IFIED BUSINESSES [Ow	nership or positi	ons in certain types of businesses]			
	BUSINESS ENTIT	Υ#1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	Boca Grande K	er 15state	Boca Commercial	uc Thorton Key partners		
ADDRESS OF BUSINESS ENTITY	P.O. Box 686, E	36.FL 3398	1 - same	- Same		
PRINCIPAL BUSINESS ACTIVITY	Real Estate		RealEstate	Real Estate		
POSITION HELD WITH ENTITY	President		ManagingPartner	president		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100%		20%	20%		
NATURE OF MY OWNERSHIP INTEREST	Stock		LLC.	Stock		
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required): Wall 9 M DATE SIGNED (required): 6-23-04						
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 filing.

## 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 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.

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.