FORM 1	S	STATEM	ENT OF		2009	
Please print or type your name, mailing address, agency name, and position bek	FIN.	ANCIAL	INTEREST	S		
LAST NAME FIRST NAME MIDDI Spurgeon Mark Andrew	E NAME :		OFFICE ONLY:	01-		
MAILING ADDRESS: P.O. Box 432					H/C/ 12 12 12 12 12 12 12 12 12 12 12 12 12	
CITY:	ZIP :	COUNTY:		ID N	N14PMO	
Boca Grande NAME OF AGENCY: Boca Grande Fire Control [33921 District	ee	Conf	1#36		
NAME OF OFFICE OR POSITION HE Commissioner Seat #1			P. Re	ed Code g		
You are not limited to the space on the lines on this form. Attach additional sheets, if necessary. CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE						
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 (check one): DECEMBER 31, 2009 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) THRESHOLDS OR DOLLAR VALUE THRESHOLDS						
PART A — PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] (If you have nothing to report, you must write "none" or "n/a")						
NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
Boca Grande Real Estate, Inc.	P.O. Bo	P.O. Box 686, Boca Grande, FL 33921			state Brokerage	
PART B - SECONDARY SOURCES (If you have nothing to re NAME OF	port , you must wi NAME OF MAJO	rrite "none" or "n/a" OR SOURCES	") ADDRESS	to business	PRINCIPAL BUSINESS	
Business entity Boca Commercial Partners	OF BUSINES U.S. Postal S		OF SOURCE 390 Park Ave., Boca Grande	, FL 33921	ACTIVITY OF SOURCE Commercial Rental	
PART C REAL PROPERTY [Land,	wildings owned by	the reporting person	.1			
(If you have nothing to report, you must write "none" or "n/a") Commercial Building, 360 Park Ave, Boca Grande, FL				FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.		
		uo, . L		file thi	RUCTIONS on who must is form and how to fill it out on page 3.	
				OTHE	ER FORMS you may need are described on page 6.	

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] (If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIB	BLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
			·				
PART E — LIABILITIES [Major debts] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF CREDITOR		ADDRESS OF CREDITOR					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses] (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	Boca Grande Real Estate, Inc.	Boca Commercial LLC					
ADDRESS OF BUSINESS ENTITY	POB 686, Boca Grande, FL 33921	POB 686 Boca Grande, FL 33921					
PRINCIPAL BUSINESS ACTIVITY	Real Estate	Real Estate					
POSITION HELD WITH ENTITY	President	Managing Partner					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100%	50%					
NATURE OF MY OWNERSHIP INTEREST	Stock	LLC					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required): Wantur DATE SIGNED (required): 6-1-10							

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.

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

Facsimiles will not be accepted.

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.

FILING INSTRUCTIONS:

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.

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.