FORM 1 STATEME	ENT OF FINANCIAL	LINTERESTS 1997
THIS STATEMENT REFLECTS MY FINANCIAL INTERPRECEDING TAX YEAR ENDING: CHECK EITHER DECEMBER 31, 1997 THAN THE CALENDAR Y	IF OTHER	ency: The Development Services FOLLOWING CATEGORIES:
LAST NAME - FIRST NAME - MIDDLE NAME: SEWART Robert Wi MAILING ADDRESS: 1500 Menroe ST. FT. Myrrs FL 3370 CITY: ZIP:	LOCAL OFFICER SPECIFIED STAT	□ STATE OFFICER □ CANDIDATE
		failure to make any required dis- or more of the following: disquali- suspension from office or employ- lty not exceeding \$10,000.
PART A — PRIMARY SOURCES OF INCOME [Source		
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
None		
		+
PART B — SOURCES OF INCOME TO BUSINESSE	S OWNED BY THE REPORTING PERSON [Major customers, clients, etc.]
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
None		
PART C — REAL PROPERTY [Land, buildings]	0 4 0 10	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.
Lots 4+5 BLK N	onge park sold.	INOTOLIOTIONIO
LTS 1-4 Kums Ave Helphs (25-44-24-92-0034,000	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3 of this packet.
•		OTHER FORMS you may need to file are described on page 6.
Lt 10 BKA Grampa Terriz	6-44-24-12-01001.0100]	(Continued on p.2)

PART D — INTANGIBLE PERSON	·			
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
Sary Buls		U.5- 60ut.		
PART E — LIABILITIES IN EXCE	SS OF NET WORTH [Major de	bts]		
NAME OF CREDITOR		ADDRESS OF CREDITOR		
None				
<u> </u>				
PART F — INTERESTS IN SPECIF	IED BUSINESSES [Ownership	or positions in certain types of businesses]		
PART F — INTERESTS IN SPECIF	IED BUSINESSES [Ownership] BUSINESS ENTITY # 1	o or positions in certain types of businesses] BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
			BUSINESS ENTITY # 3	
PART F — INTERESTS IN SPECIF NAME OF BUSINESS ENTITY			BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY ADDRESS OF			BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS			BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY			BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS			BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD			BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5%			BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5% INTEREST IN THE BUSINESS NATURE OF MY OWNERSHIP INTEREST	BUSINESS ENTITY # 1		BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY ADDRESS OF BUSINESS ENTITY PRINCIPAL BUSINESS ACTIVITY POSITION HELD WITH ENTITY I OWN MORE THAN A 5% INTEREST IN THE BUSINESS NATURE OF MY OWNERSHIP INTEREST	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2		

FILING INSTRUCTIONS FOR FORM 1

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: You also may be required to file Form 10, which is the last page of this packet. Please see that form for detailed instructions.

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: Local officers file with the Supervisor of Elections of the county in which you 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 Department of State, Room 1802, The Capitol, Tallahassee, Florida 32399-0250. Candidates file this form together with your qualifying papers. To determine what category your position falls under, see the "Who Must File" Instructions on page 3. If you were mailed the form by the Secretary of State or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

WHEN TO FILE: Initially, each local officer, 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. Thereafter, local officers, state officers, and specified state employees are required to file by July 1st following each calendar year they hold their positions. Candidates for publicly-elected state or local office must file at the same time they file their qualifying papers.

(Continued on p.3) F

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