FORM 1	STATEMENT	OF		2004		
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INT	ERESTS				
LAST NAME - FIRST NAME - MIDDLE N TALLEY BOY MAILING ADDRESS / -27841 Hickey	DE WAYNE	FOR OFFIC USE ONLY:		RECEIVED TO SUPERVISOR OF		
BONITA Spain NAME OF AGENCY: BONITA VILLA NAME OF OFFICE OR POSITION HELD ASSISTANT	165 34134 LEE 16E CDD OR SOUGHT:	E	ID No. Conf. Code P. Req. Cod	FIT 5: 2:		
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, 2004 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 OB DOLLAR VALUE THRESHOLDS						
NAME OF SOURCE	COME [Major sources of income to the report SOURCE'S	ing person]		PTION OF THE SOURCE'S		
PREMIER PROP. CF SWF	ADDRESS EL.ING, 4300 GULF SHUL NAPLES, FL 39	2F BLUA N.		PAL BUSINESS ACTIVITY ESTATE SALES		
PART B SECONDARY SOURCES CON NAME OF BUSINESS ENTITY	F INCOME [Major customers, clients, and other NAME OF MAJOR SOURCES OF BUSINESS' INCOME	er sources of income to ADDRESS OF SOURCE	businesses o	wned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PART C REAL PROPERTY [Land,	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.					
/				JCTIONS on who must file and how to fill it out begin 3.		
				FORMS you may need to described on page 6.		

PART D — INTANGIBLE PERSOI TYPE OF INTANGIB	NAL PROPERTY (S BLE	tocks, bonds, certifi	cates of deposit, etc.] BUSINESS ENTITY TO WHIC	H THE PROPERTY BEI ATE		
11/A			John Coo Little To Willo	2 0		
10/11	·			5		
				<u> </u>		
				7		
PART E — LIABILITIES [Major of	(ahte)			∑**** V _{1.3} ,-		
NAME OF CREDITOR		1	ADDRESS OF CREDITOR			
0//4						
70//						
PART F INTERESTS IN SPECI	IFIED BUSINESSES	[Ownership or pos	sitions in certain types of businesses]		
	BUSINESS I	ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	1//	A				
ADDRESS OF	70/-	//				
BUSINESS ENTITY PRINCIPAL BUSINESS						
ACTIVITY 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 CONTINU	JED ON A SEPARATE SHEI	ET, PLEASE CHECK HERE		
				, ,		
SIGNATURE (required):	$\geq \lambda$ $-$	1111	DATE S	IGNED (required):		
), V / /	alles		11/5/25		
		FILING II	NSTRUCTIONS:	, , , , , , , , , , , , , , , , , , , ,		
WHAT TO FILE:		WHERE TO F		WHEN TO FILE:		
After completing all parts of this signing and dating it, send bar		If you were maile on Ethics or a (ed the form by the Commission County Supervisor of Elections	Initially, each local officer/employee, state officer, and specified state employee must		
sheet (pages 1 and 2) for filing.		for your annual disclosure filing, return the form		file within 30 days of the date of his or her		
		to that location.	mployees file with the Supervisor	appointment or of the beginning of employ- ment. Appointees who must be confirmed by		
		of Elections of the	he county in which they perma-	the Senate must file prior to confirmation, even if that is less than 30 days from the date of their		
NOTE:		nently reside. (If in Florida, file wi	you do not permanently reside ith the Supervisor of the county	appointment.		
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 your agen	icy has its headquarters.)	Candidates for publicly-elected local office must file at the same time they file their		
		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.		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.		
			s. nine what category your position	Finally, at the end of office or employment,		
		falls under, see	the "Who Must File" Instructions	each local officer/employee, state officer, and specified state employee is required to file a		
		on page 3.		final disclosure form (Form 1F) within 60 days		
L				of leaving office or employment.		