FORM 1	STATEMENT O	F	2006			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL INTER	ESTS				
LAST NAME FIRST NAME MIDDLE MANUAL ARRESTS	Y Frank	FOR OFFICE		3		
MAILING ADDRESS: COVE	Lane		ID Code			
			1			
Fort Myers F	ZIP: COUNTY: LEC		ID No.	44 5		
Estero Community Planning Panel NAME OF OFFICE OR POSITION HELD OR SOUGHT:			Conf. Code P. Req. Code	i in Ke		
MEMBER		4				
You are not limited to the space on the lines CHECK ONLY IF CANDIDATE O	on this form. Attach additional sheets, if necessary. R NEW EMPLOYEE OR APPOINTEE		PDF 2006			
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, 2006 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 PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE OF INCOME SOURCE SOURCE'S ADDRESS PRINCIPAL BUSINESS ACTIVITY SELECT REAL STATE 9257 CORKSCrew Rd. #8 Commercial LEAST STATE BY SHAPE DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY SELECT REAL STATE 9257 CORKSCrew Rd. #8 Commercial LEAST STATE LEAST STATE LEAST STATE PRIMARY SOURCE OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE OF INCOME ADDRESS PRINCIPAL BUSINESS ACTIVITY SELECT REAL STATE SELECT REAL STATE PRIMARY SOURCE OF INCOME STATE SOURCE'S PRINCIPAL BUSINESS ACTIVITY SELECT REAL STATE PRIMARY SOURCE OF INCOME STATE SOURCE'S PRINCIPAL BUSINESS ACTIVITY SELECT REAL STATE PRIMARY SOURCE						
		of income to bu DRESS GOURCE	sinesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
 						
						
PART C REAL PROPERTY [Land, build Please see	attached sheet and 2 Part	a	FILING INSTRUCTIONS for whe and where to file this form are located at the bottom of page 2. NSTRUCTIONS on who must file	-		
TITIER FOR	en L rur!	t c	his form and how to fill it out begin on page 3. OTHER FORMS you may need to lie are described on page 6	1		

PART D — INTANGIBLE PERSONAL PROPERTY	[Stocks, bonds, certific			DEDTY DELATES	
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHI	CH THE PROP	PERIT RELATES	
NONE					
					
					
PART E — LIABILITIES [Major debts] NAME OF CREDITOR	ı	ADDRESS	OF CREDITOR	₹	
Colonial Bank	8660	8660 CORKSCEPURA			
Cot omas Dans	Este	8660 CORKSCrewRd Estero, FL 33928			
		·			
PART F — INTERESTS IN SPECIFIED BUSINESSES	S [Ownership or position	ons in certain types of businesses	 3]		
BUSINESS	SENTITY#1	BUSINESS ENTITY # 2	1	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY	A	1			
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					
IT ANY OF PARTS A TURBULOUS	ADE CONTINUE	D ON A OFFICE OUT			
IF ANY OF PARTS A THROUGH F	ARE CONTINUE	U ON A SEPARATE SHE	EI, PLEASI	E CHECK HERE	
SIGNATURE (required):)	DATE S	iGNED (requi		
* ~ 5	<u> </u>		3-8-	07	
	FILING IN	STRUCTIONS:			
WHAT TO FILE:	WHERE TO FIL		WHEN T		
After completing all parts of this form, including signing and dating it, send back only the first	on Ethics or a Coun	If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for		Initially, each local officer/employee, state officer, and specified state employee must	
sheet (pages 1 and 2) for filing.	that location. appointment or of the beginnin		30 days of the date of his or her at or of the beginning of employ-		
If you have nothing to report in a particular section, you must write "none" or "n/a" in that	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.)			ointees who must be confirmed by must file prior to confirmation, even	
section(s).			if that is less than 30 days from the date of their appointment. Candidates for publicly-elected local office		
Facsimiles will not be accepted.					
NOTE: MULTIPLE FILING UNNECESSARY:		State officers or specified state employees file with the Commission on Ethics, P.O. Drawer		must file at the same time they file their qualifying papers.	
MULTIFLE FILING UNNECESSART:		,,,,,,,			

15709, Tallahassee, FL 32317-5709; physical

address: 3600 Maclay Boulevard, South, Suite

Candidates file this form together with their

falls under, see the "Who Must File" Instructions

To determine what category your position

201, Tallahassee, FL 32312.

qualifying papers.

on page 3.

CE FORM 1 - Eff. 1/2007

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.

PAGE 2

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 posi-

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.

FORM 1 "PART C" (GREGORY F. TOTH)

PROPERTY	PARCEL ID			
20% Erika Lane	34-46-25-00-00005.0010			
50% Park Circle	34-46-25-00-00012.0000			
1% Sandy Lane	34-46-25-01-0000C.035G 34-46-25-01-0000C.035A 34-46-25-01-0000C.035D 34-46-25-01-0000C.035E 34-46-25-01-0000C.035D 34-46-25-01-0000C.035D 34-46-25-01-0000C.035B 34-46-25-01-0000C.035F 34-46-25-01-0000C.0170 34-46-25-01-0000C.0170 34-46-25-01-0000S.0020			
8.33% Gulfcoast Driving Range	34-46-25-01-0000C.0150			
10% Koreshan/Cypress View	22-46-25-00-01001.1010			
10% I-75 & SR 82	22-44-25-P1-00066.0000			
50% Twin Peaks	33-46-25-00-00019.0010			
1.25% Alico 73, LLC	03-46-25-00-00001.101A			
7.5% Carissa, LLC	17-45-25-00-00004.0020 17-45-25-00-00004.0000 17-45-25-01-0000.0270 17-45-25-01-0000.0280			
1.25% Penzance Square	08-45-25-00-00004.0020			
7.5% Wildcat Hollow, LLP	33-46-25-00-00018.0090			
12% Tango Three, LLP	34-46-25-16-00003.0001 34-46-25-16-00003.0002 34-46-25-16-00003.0003 34-46-25-16-00003.0004 34-46-25-16-00003.0005 34-46-25-16-00003.0007 34-46-25-16-00003.0008 34-46-25-16-00003.0009 34-46-25-16-00003.0010			

1.25% West Cypress View, LLP	22-46-25-00-01001.1100
50% Colonial Fowler	34-46-25-15-00000.0008 34-46-25-15-00000.0009
1.25% Parkway 511	17-45-25-00-00004.0000

Form 1X Financial Info-Greg