FORM 1F

FINAL STATEMENT OF FINANCIAL INTERESTS

2021

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)						
LAST NAME — FIRST NAME — MIDDLE NAME	<u>:</u> :	NAME OF REPORTING PERSON'S AGENCY:				
TUYLS JoshnA John						
MAILING ADDRESS:						
23257 E.EL DORA	so Ave.	CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):				
BONTY SPRINSS 34	1134 LEE					
BONTY SPRINGS 34134 LEE CITY: ZIP: COUNTY:		CONSTRUCTION LICENSING				
		(ONSTRUCTO	on LICENSING			
****	THE PARTY OF THE OFFI	TION MUST BE COMPLET				
DISCLOSURE PERIOD:	OTH PARTS OF THIS SECT	TION MUST BE COMPLET	ED***			
THIS STATEMENT REFLECTS MY FINANCIAL	INTERESTS FOR THE PERIO	OD BETWEEN JANUARY 1, 2	021 AND THE LAST DATE I HELD THE PUBLIC			
OFFICE OR EMPLOYMENT DESCRIBED ABO	VE, WHICH DATE WAS	UT19, 2021	, 2021. (Date must be prior to 12/31/21)			
MANNER OF CALCULATING REPORTA		,				
FILERS HAVE THE OPTION OF USING R	EPORTING THRESHOLDS	THAT ARE ABSOLUTE DO	LLAR VALUES, WHICH REQUIRES FEWER CENTAGE VALUES (see instructions for further			
details). PLEASE STATE BELOW WHETHER	THIS STATEMENT REFLECTS	S EITHER (must check one):	SENTAGE VALUES (see instructions for further			
\bowtie	OR					
PART A PRIMARY SOURCES OF INCO	ME [Major sources of income	e to the reporting person - See	instructions]			
0 ± 0 €	ite none or ma j		**			
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS		DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
Bim	3003 TAMI		Restaurant			
HTH	8771 ESTER					
Raya			RENTAL UNITS			
BAT Bulsens	1401 Railhoud Blvd.		CONST.			
ALLCINE Drives.	3003 TAMIUMI TR. V.		BASEBALL			
		A Commission of the Commission				
PART B SECONDARY SOURCES OF INCOME						
[Major customers, clients, and other sources of income to businesses owned by reporting person - See instructions]						
(If you have nothing to report, w	1990 - 1					
	IE OF MAJOR SOURCES F BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
			NIA			
N/A						
		Parents .	The same of the sa			
		R	PORI			
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] FILING INSTRUCTIONS for when						
(If you have nothing to report, wr	and where to file this form are located at the bottom of page 2.					
LKR ESTEND B						
HTH ESTERD B	INSTRUCTIONS on who must file this form and how to fill it out					
MIH ESTERD B	Ivd.		begin on page 3 of this packet.			
			Test			

attorney in good standing with the Florida Bar prepared this for you, he or she must complete the following statement: I,			THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IS NOT THE PERSON NAME				
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a") NAME OF CREDITOR PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3 BUSINESS ENTITY # 5 BUSINESS ENTITY # 5 BUSINESS ENTITY # 5 BUSINESS ENTITY # 5 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 2 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1 BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 1			ficates of deposit, etc See	e instructions]			
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IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE SIGNATURE OF FILER: Signature: CPA or ATTORNEY SIGNATURE ONLY If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this for you, he or she must complete the following statement: I, prepare the CE Form 1 in accordance with Section 112.3145, Flor Statutes, and the instructions to the form. Upon my reasona knowledge and belief, the disclosure herein is true and correct CPA/Attorney Signature Date Signed Date Signed Date Signed	I OWN MORE THAN A 5% INTEREST IN THE BUSINESS						
Signature: Signature: CPA or ATTORNEY SIGNATURE ONLY If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this for you, he or she must complete the following statement: I,	NATURE OF MY OWNERSHIP INTEREST	50%					
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	Signature: Date Signed:		If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form				

WHEN TO FILE:

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless he or she takes another position within the 60-day period that requires filing financial disclosure on Form 1 or Form 6.

WHERE TO FILE:

Local officers 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.) Form 1 filers who file with the Supervisor of Elections

FILING INSTRUCTIONS:

may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. <u>Do not email your form to the Commission on Ethics, it will be returned</u>.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bidg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filling method.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

NOTE:

If you are leaving office or employment during the first half of 2021, you may not have filed Form 1 for 2020. In that case, this is not the last form you will file. Form 1F covers January 1, 2021, through your last day of office or employment. You will be required to file Form 1 for 2020 by July 1, 2021, and risk being fined if you do not file Form 1 by the filing deadline, even if you have already filed the CE Form 1F.



Lee County Administration

2115 Second Street, Fort Myers, FL 33901 Phone (239) 533-2221

Friday, October 29, 2021

Mr. Joshua Tuyls 251 Dundee Rd Fort Myers Beach, FL 33931

RE CONSTRUCTION LICENSING

Dear Mr. Joshua Tuyls:

We are in receipt of your resignation from the above mentioned advisory committee.

The 2000 Legislature adopted certain amendments to Florida Statutes that affect persons required to file Financial Disclosure Form 1. Since you were required to file a Form 1, you are now required to file a final statement of financial interest (Form 1F) within 60 days after leaving office and/or public position, unless you are assuming a new position that would require a financial disclosure.

These forms are available, and must be filed, at the Supervisor of Elections Office, 2480 Thompson Street, Fort Myers, FL 33901, phone number 533-8683, or with the Supervisor of Elections of the county in which you permanently reside. Lee County residents may email the form to disclosure@lee.vote or should mail the form to:

Supervisor of Elections P.O. Box 2545 Fort Myers, FL 33902-2545

The Board of County Commissioners wishes to express their sincere appreciation for your service on this committee. Lee County is very fortunate to have dedicated and concerned citizens who will volunteer their valuable time in striving to help make Lee County a better place for all of our residents and visitors. We hope to have the opportunity of working with you again in the future.

Thank you for your volunteer spirit.

Sincerely, Lee County Administration

Sent on behalf of the BOARD OF COUNTY COMMISSIONERS LEE COUNTY, FLORIDA 21N0Y028M0838 S0E Lee Co F1

SAINT PETERSBURG FL 30 OCT 2021 PM 4 1

23257 E El Dorado Ave Bonita Springs, FL 34134

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FOREVERT/ USA FOREVE

Supervisor OF Elections

P.O. BOX 2545

FORT MYERS, FL. 33902-2545