| FORM 1 | STATEM | ENT OF | 2004 | | | |
|---|--|---|---|--|--|--|
| Please print or type your name, mailing address, agency name, and position belo | w: FINANCIAL | INTERESTS | | | | |
| LAST NAME FIRST NAME MIDD | | FOR OF USE ON | | | | |
| MAILING ADDRESS : | | | 30 1417 | | | |
| 250 600 400 | ~ | | ID C | | | |
| CITY: | ZIP: COUNTY: | LEE | | | | |
| | | | ID NO. | | | |
| NAME OF AGENCY: /fc.Ml. C | DARY COUNCIL | - CENTES | ComCod | | | |
| NAME OF OFFICE OR POSITION HE | LD OR SOUGHT: (B) 774 (BE) 10 2 47 | 72.01) | P. Req. de GIIIV | | | |
| 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, 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 | | | | | | |
| | , OR USING COMPARATIVE THRES | HOLDS, WHICH ARE USUALI | LY BASED ON PERCENTAGE VALUES (see | | | |
| COMPARATIVE (PERCENTAG | E) THRESHOLDS | OR I | DOLLAR VALUE THRESHOLDS | | | |
| | | he reporting person] RCE'S PRESS | DESCRIPTION OF THE SOURCE'S | | | |
| The ECH 49 VERTINING. | 516 C. 2286 Cc. 185 | (1. 55%61 | ADVENTISALE LOCKES | | | |
| | | | | | | |
| PART B SECONDARY SOURCES NAME OF BUSINESS ENTITY | OF INCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME | ADDRESS OF SOURCE | businesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE | | | |
| ancional reception | Anorchsmi | 3200 Binderpotro NAPLES FO 3413 2000 MAIN ST. # | 1 1 com one of the secon ten | | | |
| Partiety + Francisco | AR 1 : 1277 Smc | E1.0000000 Fee 23: | 7 7. F. W. C. 1/2 | | | |
| FOUR SHOW RESCOT | 412 7.7626 | Francis Boken | 33431 140 CU (S) F | | | |
| PART C REAL PROPERTY [Land, CICICE 128 LC Africa 257 Gr | buildings owned by the reporting person 15: 5: 10:27/2040 81:10:17:27/2040 | · | FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin | | | |
| | | y | on page 3. OTHER FORMS you may need to file are described on page 6. | | | |

| PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES | | | | | | |
|--|---------------|---------------------------------------|---------------------|---------------------|--|--|
| Sizer | | THE CERT SHEEP TO SHEEF JAC. | | | | |
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| PART E — LIABILITIES [Major debts] NAME OF CREDITOR | | ADDRESS OF CREDITOR | | | | |
| RANK IT AND WERE SIT | | 13.69 US YIS G. SOUTE DIE FF EJ-16 TE | | | | |
| | | 1.500 | | | | |
| | | | | | | |
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| | | | | | | |
| PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses] | | | | | | |
| | BUSINESS ENTI | ITY # 1 | BUSINESS ENTITY # 2 | 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 | | <u> </u> | | | | |
| NATURE OF MY OWNERSHIP INTEREST | | | | | | |
| IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE | | | | | | |
| SIGNATURE (required): | | | | | | |

SIGNATURE (required):



DATE SIGNED (required)

6 - 32 8kg 5

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:

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.