FORM 1	STATEM	STATEMENT OF					
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERI			S	The state of the s			
WAGNER R ROLL MAILING ADDRESS: 25900 HICKORY BOU	BERT	FOR O USE O					
SUITE #601			ID C	ode 39			
CITY: BONITA SPRINGS	ZIP: COUNTY: 341 34 LEE		ID N				
NAME OF AGENCY :			Cont	. Code			
NAME OF OFFICE OR POSITION HE COUNCILMAN DISTRI			P. R	eq. Code			
CHECK IF CANDIDATE OR							
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, 2001 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: MANNER OF CALCULATING REPORTABLE INTERESTS: PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VALUES. BEGINNING IN 2001, THE LEGISLATURE HAS ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS (old method) OR DOLLAR VALUE THRESHOLDS (new method)							
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE SOURCE'S OF INCOME ADDRESS PRINCIPAL BUSINESS ACTIVITY							
ANNUITIES	RAYMOND JAMES	& ASSOCIATES	PRINCIPAL BUSINESS ACTIVITY STOCK BROKER				
	FORT MYERS,	FLORIDA					
STOCKS & BONDS DEAN WITTER REYNOLDS BONITA SPRINGS, FLORIDA							
ACTIVE ASSETS	DEANWITTER RE	YNOLDS	STOCK BROKER				
PART B SECONDARY SOURCES ON NAME OF BUSINESS ENTITY	OF INCOME [Major customers, clients NAME OF MAJOR SOURCES OF BUSINESS' INCOME	, and other sources of income to ADDRESS OF SOURCE					
WAGNER ENTERPRISES	OWNER	BONITA SPRINGS	, FLA	. LAND INVESTMENT			
							
PART C REAL PROPERTY [Land, b]		<u>-</u>	and w	G INSTRUCTIONS for when here to file this form are locat- the bottom of page 2.			
CASA BONITA GRANDE	#202	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.					
			ER FORMS you may need to				

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
VARIABLE ANNUITY		PACIFIC LIFE, PASADENA, CALIFORNIA				
I.R.A.		MORGAN STANLEY DEAN WITTER, BONITA SPRINGS				
SECURITY DEPOSIT		FIRST UNION BANK, BONITA SPRINGS, FLA.				
CUNA MUTUAL LIFE INSURANCE		CUNA LIFE INSURANCE, WAVERLY, IQWA				
SAVINGS ACCOUNT		UNITED AUTOMOBILE ASSOCIATION, SAN ANTONIO, TEX				
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
		NONE				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
 	BUSINESS ENTI		BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	WAGNER ENTERPRISES					
ADDRESS OF BUSINESS ENTITY	BONITA SPRINGS, FLA		•			
PRINCIPAL BUSINESS ACTIVITY	LAND INVESTMENT					
POSITION HELD WITH ENTITY	OWNER					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	SOLE OWNER					
NATURE OF MY OWNERSHIP INTEREST	PRESIDENT					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required): DATE SIGNED (required):						

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.

FILING INSTRUCTIONS:

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.

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.

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.