FORM 1 STATEMENT OF						2003	
Please print or type your name, mailing address, agency name, and position bel	ow:	FINANCIAL	INTERE	ESTS			
LAST NAME FIRST NAME MIDDLE NAME : WAGNER R. ROBERT MAILING ADDRESS :					FFICE NLY/		
25900 HICKORY BL	VD.	1/	/	2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			
CITY: BONITA SPRINGS	ZIP : 341		ID N				
NAME OF AGENCY :			Confi	f. Code			
NAME OF OFFICE OR POSITION HI	LD OR S) p. Re	eq. Code			
COUNCILMAN DISTR	ICT #		V	C			
CHECK IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE							
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, 2003 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 OR DOLLAR VALUE THRESHOLDS							
PART A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE OF INCOME ADDRESS					_	SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY	
ANNUITIES RAYMOND JAME			& ASSOCIA	TES STOCK BROKER			
FORT MYERS, FLORIDA							
STOCKS & BONDS DEAN WITTER F			YNOLDS STOCK BR			TOCK BROKER	
BONITA SPRINGS							
					of income to businesses owned by the reporting person] RESS PRINCIPAL BUSINESS OURCE ACTIVITY OF SOURCE		
WAGNER ENTERPRISES		OWNER	BONITAS	SPRIN	GS	LAND INVESTMENT	
CITY OF BONITA SPR	INGS			SPRINGS COUNCILMAN			
		,					
PART C REAL PROPERTY [Land, buildings owned by the reporting person]					FILING INSTRUCTIONS for when and where to file this form are locat-		
CASA BONITA GRAND	E CO1	ed at the bottom of page 2.					
CASA BONITA GRAND	正 CO I	INSTRUCTIONS on who must file this form and how to fill it out begin					

OTHER FORMS you may need to file are described on page 6.

PART D — INTANGIBLE PERSO TYPE OF INTANG		ks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
VARIABLE ANNUITY		PACIFIC LIFE INSURANCE. PASADENA. CALIFORNIA					
I.R.A.		DEAN WITTER REYNOLDS. BONITA SPRINGS. FLORIDA					
CUNA MUTUAL LIFE	3	WAVERLY. IOWA					
SAVINGS SIBSCRIB	BER ACCOUNT	U.S.A.A. SAN ANTONIO, TEXAS					
PART E — LIABILITIES [Major of NAME OF CRED		ADDRESS OF CREDITOR					
NONE							
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
	BUSINESS ENTI	TY#1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3			
NAME OF BUSINESS ENTITY	WAGNER ENTERPRISES						
ADDRESS OF BUSINESS ENTITY	BONITA SPRI	INGS, FLA	•				
PRINCIPAL BUSINESS ACTIVITY	LAND & REAL	LSTATE					
POSITION HELD WITH ENTITY	OWNER						
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	SOLE OWN	VER					
NATURE OF MY OWNERSHIP INTEREST	PRESIDEM	T					
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.

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 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.