FORM 1	STA	TEMEN	Г ОГ		2009			
Please print or type your name, mailing address, agency name, and position below:	<b>FINAN</b>	CIAL IN	<b>TEREST</b>	S				
LAST NAME FIRST NAME MIDDLE NAME : WEEKS, SEAN, ROBELT MAILING ADDRESS : 14750 DONATELLO CT.				DFFICE DNLY:	28409355NE Lee Co F			
CITY: BONITA SPAINES NAME OF AGENCY: BONITA VILLAG NAME OF OFFICE OR POSITION HELD		UNTY: 1135 4	ÆE	ID Con ID No. Conf.	Code			
VICE CHAILMA You are not limited to the space on the lines	on this form. Attach addition			- <u>-</u>	Code			
**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, 2009 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):     OR     OR								
COMPARATIVE (PERCENTAGE) T	OME [Major sources of in			VALUE INK				
(If you have nothing to repor NAME OF SOURCE OF INCOME	t, you must write "none	" or "n/a") SOURCE'S ADDRESS	د میں اور		RIPTION OF THE SOURCE'S			
SEW ENGINESTING,		TELLENE	CT. #101	1 ENGINERLING				
		SPLINGS	F2 34135	35 Sector				
			ADDRESS OF SOURCE	to businesse	s owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
PART C REAL PROPERTY (Land, buil (If you have nothing to report	dings owned by the repor t, you must write "none"	ting person] ' or "n/a")		when ar are loca	INSTRUCTIONS for Id where to file this form ted at the bottom of page 2. UCTIONS on who must form and how to fill it out			
				begin or OTHEF	re described on page 6.			

PART D INTANGIBLE PERS							
		ust write "none" or "r	va j				
			BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
Stocks 1	BONDS	Na	E PERSONA	-L			
			<u> </u>	•.			
				1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.			
<u> </u>			• <sup>•</sup> ,	- 19-18 (N 1) 19-18-19-12.			
PART E - LIABILITIES [Major	debts]						
(If you have nothing	i to report, you mu	ust write "pone" or "r	/a")	the second second	1		
		1		OF CREDITOR			
		P.o. Ba	K 900 187 1		144 4039.		
CHASE BANK UNIT							
BANK UNIT	<u>FD</u>	877-	779- BANK	L ADDALAN	<u>a stat</u>		
	<u> </u>						
PART F - INTERESTS IN SPEC	FIED BUSINESSE	S (Ownership or positi	ons in certain types of businesses	s]			
	to report, you must	t write "none" or "n/a		-1			
	BUSIN	NESS ENTITY # 1	BUSINESS ENTITY #	2 BUSINES	SS ENTITY # 3		
NAME OF BUSINESS ENTITY	SRW E	Fort. Inc			3		
ADDRESS OF BUSINESS ENTIT	Y	· · · · · · · · · · · · · · · · · · ·					
					·····		
PRINCIPAL BUSINESS ACTIVITY	Ench.	CONSULTA	<u></u>				
POSITION HELD WITH ENTITY	Ou.	Consulta.			s		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	L L	<u> </u>					
NATURE OF MY			<u> </u>				
	PAINE	ccpar					
IF ANY OF BARTS	A THROUGH F	ARE GONTINUE	D ON A SEPARATE SHE	ET. PLEASE CHECK	WERE 🖸 🖓		
				IGNED (required):			
SIGNATURE (required):	Del		A A A A A A A A A A A A A A A A A A A	June 25	2040		
<u>~~</u>				-ime es	, 2010		
		<u>FILING IN</u>	STRUCTIONS:				
WHAT TO FILE:		WHERE TO FIL		WHEN TO FILE:			
After completing all parts of this signing and dating it send bac			you were mailed the form by the Commission <b>Initially</b> , each local officer/employee, stat Ethics or a County Supervisor of Elections for officer, and specified state employee mu				
sheet (pages 1 and 2) for filing.		your annual disclos	our annual disclosure filing, return the form to file within 30 days of the date of his or h				
If you have nothing to report in a particular		that location.	ment Appointees who must be confi				
section, you must write "none" or "n/a" in that			Local officers/employees file with the Supervisor of Elections of the country in which they normal the Senate must file prior to confirmation, e				
section(s). If that is less than 30 days from the date of the							

Facsimiles will not be accepted.

## 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.

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 fire this form together with their qualifying papers.

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

appointment.

Candidates for publicly-elected local offic must file at the same time they file the qualifying papers.

Thereafter, local officers/employees, sta officers, and specified state employees a required to file by July 1st following ead calendar year in which they hold their pos tions.

Finally, at the end of office or employment each local officer/employee, state officer, ar specified state employee is required to file final disclosure form (Form 1F) within 60 da of leaving office or employment.