FORM 1	STATE	MENT OF	2003		
MAILING ADDRESS: 4536 SW /	ENAME: NANLY LYNN LACE 33914 LEE ZIP: COUNTY BOCC CLEXIC		FFICE		
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 II NAME OF SOURCE OF INCOME NAME	NCOME [Major sources of income	to the reporting person] SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
PART B SECONDARY SOURCES OF BUSINESS ENTITY	OF INCOME [Major customers, clien NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	Physinesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PART C REAL PROPERTY [Land, I	ouildings owned by the reporting pe	erson]	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 on page 3. OTHER FORMS you may need to file are described on page 6.		

PART D — INTANGIBLE PERSO TYPE OF INTANG	DNAL PROPERTY [Stocks, bonds, cert	ks, bonds, certificates of deposit, etc.] BUSINESS ENTITY TO WHICH THE PROPERTY RELATES		
CHECKING	5.	SUNCURST SCHOOLS FOU		
SAVINGS		SUNCOAST SCHOOLS FCU		
PART E — LIABILITIES [Major of NAME OF CRED		ADDRESS OF CREDITOR		
WIA				
PART F — INTERESTS IN SPECI	FIED BUSINESSES [Ownership or pos	itions in certain types of businesses]		
	FIED BUSINESSES [Ownership or pos BUSINESS ENTITY # 1	itions in certain types of businesses] BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY			BUSINESS ENTITY # 3	
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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.

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.

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.