FORM 1	STA	TEMENT OF	7	2008	
Please print or type your name, mailing address, agency name, and position below:		CIAL INTER	ESTS		
LAST NAME - FIRST NAME - MIDDLE N Weisberg Steven		<b>\</b>	FOR OFFI		
RARCO Investmen	of Properti	es -		ı ID Code	
1500 Colonial Blvd. Suit 217				ib code	
CITY: Fort. Myers ZIP: FI COUNTY: 33907 Lee				1D No.	
NAME OF AGENCY :				Conf. Code	
NAME OF OFFICE OR POSITION HELD OR SOUGHT:  Board of Adjustments				P. Req. Code	
You are not limited to the space on the lines of CHECK ONLY IF CANDIDATE OF	,	ional sheets, if necessary.  OYEE OR APPOINTEE		D No. 9942 9942 99642 99	
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, 2008  OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:  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 SOURCE'S  OF INCOME ADDRESS				DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
	perties 1500	Colonial Blow. #2	-17 4	Peul Estate Broterage	
			S	iules + Investment	
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		annun di manga 1918 Salahan			
PART B SECONDARY SOURCES OF I	NCOME [Major custome NAME OF MAJOR SOU! OF BUSINESS' INCO	RCES   ADD	of income to but RESS DURCE	usinesses owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
PART C REAL PROPERTY [Land, build 1/3rd interest in 1 10% interest in 1	361 Royal Colonial + 1	Palm Sy. Bl.	cres,	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 PERSONAL PROPERTY (Stoce TYPE OF INTANGIBLE	cks, bonds, certificates of deposit, etc.]  BUSINESS ENTITY TO WHICH THE PROPERTY RELATES			
N/A				
The state of the s				
PART E — LIABILITIES [Major debts]	ADDRESS OF CREDITOR			
NAME OF CREDITOR	ADDRESS OF CREDITOR			
/V/A				
PART F — INTERESTS IN SPECIFIED BUSINESSES [C				
NAME OF CARGO T				
BUSINESS ENTITY RARCO IN	westment Properties, Inc.			
BUSINESS ENTITY /500 CS10	onial Blud: Svit 217			
ACTIVITY 1724/ESTO 16	Brokerage Gales + Investment			
WITH ENTITY President				
INTEREST IN THE BUSINESS V23				
NATURE OF MY OWNERSHIP INTEREST  100 %				
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE				
SIGNATURE (required):	DATE SIGNED (required):  - 9 - 09			
FILING INSTRUCTIONS:				

## 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 filling.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

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.

# 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; 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.