FORM 1	STATEM	IENT OF		2008			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	5 [				
LAST NAME FIRST NAME MIDDLE WHITCOMS ST MAILING ADDRESS:	NAME: TALEY PAGE	FOR OF USE OF					
4875 PELICAN COL	ONY BLUD #70	7/	ı iD C	ode S			
BONTH SPRINGS  CITY:  STATE ROAD COMMUNIT  NAME OF AGENCY:  CHAIRMAN  NAME OF OFFICE OR POSITION HELD	LEE MKT	ID N	Canife				
You are not limited to the space on the lines  CHECK ONLY IF  CANDIDATE (	s, if necessary. PPOINTEE		ĬĠŐ				
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, 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 INC NAME OF SOURCE OF INCOME	he reporting person] RCE'S RESS		SCRIPTION OF THE SOURCE'S RINCIPAL BUSINESS ACTIVITY				
CENTER PLAZA BLOG LTD 1647 SWENT TOR PE				RENTAL			
CRYSTAL IND PARK LLC			RENTAL				
			<u>.</u>				
PART B SECONDARY SOURCES OF  NAME OF BUSINESS ENTITY	INCOME [Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
VRC	RENTS	11901 PAMEDICUS DR 1	YYENS	RECORD STORAGE			
POOS	RENTS	11901 AMEDICUS DA	HYERS	PODS			
	•						
PART C - REAL PROPERTY [Land, buing the second of the seco	34134 (RESIDENCE) HOME)	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.					
			ER FORMS you may need to e described on page 6.				

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]						
TYPE OF INTANC		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
UBS IRA AC	CCT (ROTH) VI	ARI WS	COMMON STOCKS			
				· · · · · · · · · · · · · · · · · · ·		
			· .			
			<u> </u>	<u> </u>		
PART E — LIABILITIES [Major NAME OF CRE			ADDRESS OF CREE	OITOR .		
		· · · · · ·	ADDITEGO OF OREL			
THORNGUAG MONTGA	Œ	<u> </u>				
PART F INTERESTS IN SPEC	CIFIED BUSINESSES [Ownership or	positions in a	artain types of husinessas]			
TART - INTERESTORIO	BUSINESS ENTITY # 1	positions in c	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF			BUSINESS ENTITY # 2	BUSINESS EN III 1 #-3		
BUSINESS ENTITY ADDRESS OF	CALYSTAL TWO PARK LLC					
BUSINESS ENTITY	147 SCCPLAZA SCC 33573		HaNG	·		
PRINCIPAL BUSINESS ACTIVITY	CHATER PLAZABLOG-		10011			
POSITION HELD WITH ENTITY	1647 SCEPLALA SCC 32572					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS						
NATURE OF MY OWNERSHIP INTEREST						
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required): DATE SIGNED (required): 6/23/07						
proce of.						
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 filing.

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.