FORM 1		STATEMENT OF				2011		
Please print or type your name, mailing address, agency name, and position be	ow:	FINANCIAL	INTE	RESTS	<u> </u>			
LAST NAME FIRST NAME MIDE WHITCOMO MAILING ADDRESS :	~	ANLEY P		FOR O USE O				
<u>4875 PELICAN</u>			Code					
BONITA SPRINGS 72 94134 L CITY: ZIP: COUNTY:						NUC21.		
		ID N						
NAME OF AGENCY :	A.	Con	f. Code					
NAME OF OFFICE OR POSITION HI			eq. Code					
<u>DIK:</u> <u>MESIDEAT</u> SP. You are not limited to the space on the l								
	OR		-			e e e e e e e e e e e e e e e e e e e		
**** 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 (must check one): Image:								
PART A PRIMARY SOURCES OF	NCOME	[Major sources of income to the						
(If you have nothing to report, you NAME OF SOURCE OF INCOME		SOURCE'S ADDRESS			DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY			
CRYSTAR WAUSTRIAL PARK LLC		AMEDICUS LANG FT MYLLS		LEASE/RENTAL				
PART B SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")								
NAME OF BUSINESS ENTITY		OF MAJOR SOURCES BUSINESS' INCOME		DDRESS SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
SOC SECURM								
					··			
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")					FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.			
CALISTAL NOUSRUAL PARK LLC PT MYKAS						RUCTIONS on who must		
CRYSTAL PRIME INC 20 MYERS CENTRA PLAZA DIDG SUN CATY ON 72					file th	is form and how to fill it out on page 3.		
			- .			ER FORMS you may need are described on page 6.		

PART D — INTANGIBLE PERSONAL PROPER (If you have nothing to report, you	TY (Stocks, bonds, certified must write "none" or "I	cates of deposit, etc See instri n/a")	uctions p. 5]				
TYPE OF INTANGIBLE	ł	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
NENE							
		<u></u>					
PART E — LIABILITIES [Major debts - See instr (If you have nothing to report, you		n/a")					
NAME OF CREDITOR	1	ADDRESS OF CREDITOR					
SPS MONTAACE		SALT LAKE COST ISTALL					
SPS MONTARCE BANK OF AMERICA		CHARLOTTE N.C.					
		CATALOITE W.E.					
PART F INTERESTS IN SPECIFIED BUSINESS	SES [Ownership or positi	ions in certain types of businesse	s - See instructions p. 5]				
(If you have nothing to report, you me	ust write "none" or "n/a" SINESS ENTITY # 1	") . BUSINESS ENTITY #					
		BUƏINEƏƏ ENTIT #	2 BUSINESS ENTITY # 3				
	NA						
ADDRESS OF BUSINESS ENTITY	/ ·		<u> </u>				
PRINCIPAL BUSINESS ACTIVITY		<u> </u>					
POSITION HELD WITH ENTITY							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			112				
NATURE OF MY OWNERSHIP INTEREST			S S				
IF ANY OF PARTS A THROUGH	F ARE CONTINUE	D ON A SEPARATE SHE					
SIGNATURE (required):			NED (required):				
0							
min	\mathcal{A}	61,	18/12				
(/ • -							
WHAT TO FILE:	WHERE TO I	<u>STRUCTIONS:</u>					
After completing all parts of this form, including		TILE: the form by the Commission	WHEN TO FILE: Initially, each local officer/employee, state				
signing and dating it, send back only the first sheet (pages 1 and 2) for filing.	on Ethics or a Coun	nty Supervisor of Elections for sure filing, return the form to	officer, and specified state employee must file within 30 days of the date of his or h				
	that location.	ure thing, return the joint to	appointment or of the beginning of employment				
If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).	of Elections of the cou	loyees file with the Supervisor unty in which they permanently not permanently reside in	Appointees who must be confirmed by the Sena must file prior to confirmation, even if that is le than 30 days from the date of their appointme				
	Florida, file with the Supervisor of the county where your agency has its headquarters.)		Candidates for publicly-elected local office musifile at the same time they file their qualifying				
NOTE:	, -	specified state employees	papers.				
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	file with the Commis 15709, Tallahassee	ission on Ethics, P.O. Drawer e, FL 32317-5709; physical clay Boulevard, South, Suite	Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calend year in which they hold their positions.				

Finally, at the end of office or employme each local officer/employee, state officer, a d specified state employee is required to file а final disclosure form (Form 1F) within 60 da s of leaving office or employment. However, fili a CE Form 1F (Final Statement of Financ Interests) does not relieve the filer of filing CE Form 1 if he or she was in their position December 31, 2011.

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.

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.

Facsimiles will not be accepted.

PART D — INTANGIBLE PERSONAL (If you have nothing to re	PROPERTY [Stocks, bonds, certifica port, you must write "none" or "n/	ates of deposit, etc See instructions p. 5 a")]			
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
None	£					
· ·						
· · · · · · · · · · · · · · · · · · ·						
PART E — LIABILITIES [Major debts (If you have nothing to re	- See instructions p. 5] port, you must write "none" or "n/	a")				
NAME OF CREDITOR		ADDRESS OF CREDITOR				
SPS MONTOHLE		SALT LAKE COM UTAH				
SPS MONTOACE DANK OF AMERICA		CHARLOTTE N.C.				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5] (If you have nothing to report, you must write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3						
NAME OF BUSINESS ENTITY	NIA					
ADDRESS OF BUSINESS ENTITY	///					
PRINCIPAL BUSINESS ACTIVITY						
POSITION HELD WITH ENTITY						
I OWN MORE THAN A 5%			112			
NATURE OF MY OWNERSHIP INTEREST			2,111,21 PM 1129 SOE			
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE						
SIGNATURE (required):		DATE SIGNED (required): 말				
Au	M	6/18/12				
FILING INSTRUCTIONS:						
WHAT TO FILE:	WHERE TO F	ILE: WHE	N 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).

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; 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.

Facsimiles will not be accepted.

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. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.

