FORM 1 STATEMENT OF				2001		
Please print or type your name, mailing address, agency name, and position below: FINANCIAL INTERESTS						
LAST NAME FIRST NAME MIDDLE NA (1)0) $fe Eugen MAILING ADDRESS: 1953 Beach PKCape Corol 33CITY: f = 2P \neq 2 - 4 PANAME OF AGENCY:Vice Chairman NAME OF OFFICE OR POSITION HELD O CHECK IF CANDIDATE OR$	USE 0	FOR OFFICE USE ONLY: ID Code ID No. Conf. Code P. Req. Code				
CHECK IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE 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, 2001 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:						
MANNER OF CALCULATING REPORTABLE INTERESTS: PRIOR TO 2001, THE THRESHOLDS FOR REPORTING FINANCIAL INTERESTS WERE COMPARATIVE, USUALLY BASED ON PERCENTAGE VALUES. BEGINNING IN 2001, THE LEGISLATURE HAS ALLOWED FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one): COMPARATIVE (PERCENTAGE) THRESHOLDS (old method) OR OR DOLLAR VALUE THRESHOLDS (new method)						
PART A PRIMARY SOURCES OF INCOM NAME OF SOURCE OF INCOME	ne reporting person] RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
Interest 45to						
Social Securit	/ ·	······································				
Veterons Adm Disch lity						
Construction						
	S OF INCOME [Major customers, clients, and other sources of NAME OF MAJOR SOURCES ADDR OF BUSINESS' INCOME OF SOU		to business	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
PART C REAL PROPERTY [Land, buildings owned by the reporting person] 1953 1382eh 19K44 B1. 2929-3030 4+ Feces				FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.		
BI 3031 BI 1945 BI 733 BI 5330 BI 5333 BI 1027						
				OTHER FORMS you may need to file are described on page 6.		

PART D — INTANGIBLE PERSO TYPE OF INTANG		cks, bonds, certific		ICH THE PROPERTY RELATES		
Stock						
1:		Finsy	Finst Union			
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
NONE						
		ļ				
PART F — INTERESTS IN SPECI	FIED BUSINESSES [O	wnership or position	ons in certain types of businesse	s]		
	BUSINESS ENT	TTY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	/					
ADDRESS OF BUSINESS ENTITY	·					
PRINCIPAL BUSINESS ACTIVITY						
POSITION HELD WITH ENTITY						
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): Ecquired Date SIGNED (required): 6-19-0-2-						
FILING INSTRUCTIONS:						
WHAT TO FILE: After completing all parts of this signing and dating it, send back sheet (pages 1 and 2) for filing.	form, including If conly the first on for	Ethics or a Cou	E: the form by the Commission inty Supervisor of Elections dosure filing, return the form	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 employ-		

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.

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.

appointment or of the beginning (ment. 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.