FORM 1	STATEM	ENT OF		2005	
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	S		
LAST NAME FIRST NAME MIDDLE I	NAME :	FOR OF			
MAILING WORTHAM, JOHNNY 1636 S FOUNTAINHEA	AD RD		ID Code	70 64PR	
FORT MYERS FL 339	<i>9</i> 19 		ID No.	21PHO400	
NAME OF AGENCY : NAME OF OFFICE OR POSITION HELD	OR SOUGHT :		Conf. Code P. Req. Code	06APR21PM0400 SDE Lee CO	
CHECK ONLY IF CANDIDATE O	PR NEW EMPLOYEE OR AF	PPOINTEE		Ď	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FIN A FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2005 MANNER OF CALCULATING REPORTATION THE LEGISLATURE ALLOWS FILERS REQUIRES FEWER CALCULATIONS, O instructions for further details). PLEASE STATE OF THE PERIOD TH	W WHETHER THIS STATEMENT IS OR SPECIFY BLE INTERESTS: THE OPTION OF USING REPORE OF USING COMPARATIVE THREST STATE BELOW WHETHER THIS ST.	RECEDING TAX YEAR, WHETE FOR THE PRECEDING TAX Y TAX YEAR IF OTHER THAN T RTING THRESHOLDS THAT A HOLDS, WHICH ARE USUALI TATEMENT REFLECTS EITHER	HER BASED ON A CALEND YEAR ENDING EITHER (ch THE CALENDAR YEAR: ARE ABSOLUTE DOLLAR LY BASED ON PERCENTA	VALUES, WHICH	
	T A PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] NAME OF SOURCE SOURCE'S		DESCRIPTION OF THE PRINCIPAL BUSINES	HE SOURCE'S	
Separ Ditrict of La	Jany 205T Co.	Sm the F11115 12, 3970	tes Public	Eleration	
PART B SECONDARY SOURCES OF I NAME OF BUSINESS ENTITY	INCOME [Major customers, clients, a NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	PRINCIP	PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
a			FILING INSTRUCT and where to file this ed at the bottom of pa	form are locat-	
			INSTRUCTIONS of this form and how to on page 3.	-	
			OTHER FORMS you file are described on		

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES						
Hoticand - 11KOP		Pleto of Horida				
15/1		thereignice timeseich				
7519		Lorder Administration Since				
7.579		AIC VALIC				
7 /						
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]						
	BUSINESS ENTITY # 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): DATE SIGNED (required): 42/2/-06						
FILING INSTRUCTIONS:						
WHAT TO FILE:	WH	HERE TO FIL	E: V	VHEN 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.

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.

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.

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