

Speed Letter.

To Bill Lawler - Supervisor of Elections From F. A. Aguilar
P.O. Box 562001 877 MAWARD BAYE
ORLANDO, FLA 32856-2001 ROSLIDGE, TN 37861-5947

Subject FINANCIAL DISCLOSURE

- No 9 & 10 FOLD
MESSAGE

PLEASE NOTE THAT I HAVE FILLED OUT THE FORM TO INCLUDE THE FIRST 5 MONTHS OF 2012. I HAVE RESIGNED FROM THE P&Z BOARD, SOLD MY HOUSE (6/14/2012) AND MOVED. MY NEW ADDRESS IS SHOWN ABOVE. PLEASE UPDATE YOUR RECORDS TO REFLECT THIS CHANGE. RESPECTFULLY

Date 6/28/2012 Signed [Signature]

REPLY

- No 9 FOLD
- No 10 FOLD

SUPERVISOR OF ELECTIONS
 ORANGE COUNTY, FL
 2012 JUL - 2 11 10 15

Date _____ Signed _____

FINANCIAL INTERESTS

Please print or type your name, mailing address, agency name, and position below:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

Aguilar, Francis A.

MAILING ADDRESS :

415 Oak Lynn Drive

CITY :

Edgewood

ZIP :

32809-3061

COUNTY :

Orange

NAME OF AGENCY :

City of Edgewood Planning & Zoning Board

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Board Member

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

2011 APR -5 P 3:10

DIRECTOR OF ELECTIONS
ORANGE COUNTY, FL

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

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):



DECEMBER 31, 2010

OR



SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

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 (must check one):



COMPARATIVE (PERCENTAGE) THRESHOLDS

OR



DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person] (If you have nothing to report, you must write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
U.A. of P&FP Pension	103 Opevacos, Alexandria, Virginia 22314-2015	PENSION FUND
Local 803 P&FP Pension	875 Liberty Ridge Road, Suite 101, Jacksonville, FL 32256-8269	PENSION FUND
Social Security	US TREASURY	TAX ASSESSMENT

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person] (If you have nothing to report, you must write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
NONE			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person] (If you have nothing to report, you must write "none" or "n/a")

House & Lot 415 Oak Lynn Drive Edgewood, FL 32809-3061
3-lots (2.2 Acres) - 36219 Lk. Unity NW, Ft. Lauderdale, FL (Lake County)

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.

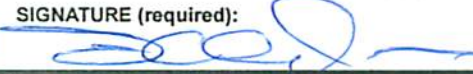
OTHER FORMS you may need to file are described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.] (If you have nothing to report, you must write "none" or "n/a")	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
Bank Account	Central Florida Educators Credit Union
IRA	Solomon - Smith Barney

PART E — LIABILITIES [Major debts] (If you have nothing to report, you must write "none" or "n/a")	
NAME OF CREDITOR	ADDRESS OF CREDITOR
NONE	N/A

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses] (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	NONE		
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): 4 April 2011

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.