FORM 1 STATEM	MENT OF FINANC	IAL INTERESTS 1990	
THIS STATEMENT REFLECTS MY FINANCIAL INTERIPRECEDING TAX YEAR ENDING:		ity of Belleview	
DECEMBER 31, 1990 SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:		* LOCAL OFFICER OFFICE HELD	
KEN NADEAU		□ STATE OFFICER OFFICE HELD	
BELLEVIEW MAYOR AND CITY COMMISSION	Control of the Contro	SPECIFIED STATE POSITION HELD □ EMPLOYEE	
5203 SÉ 113 STREET BELLEVIEW, FL 32620- E	and the second s	☐ CANDIDATE OFFICE SOUGHT	
	La de la compania de		
PART A — PRIMARY SOURCES OF INCOME [Required by Florida Statutes § 112.3145(3)(a)]. Please list below in descending order with the largest source first the name, address, and principal business activity of every source of your income excluding public salary which exceeded five percent (5%) of the gross income you received or any person received for your benefit or use during the disclosure period. The income of your spouse need not be disclosed. If continued on a separate sheet, please check here			
NAME OF SOURCE OF INCOME	ADDRESS	DESCRIPTION OF THE PRINCIPAL BUSINESS ACTIVITY	
SouthTrust Bank of Cen. Fla.	Box 3570, Ocala, Fr. 32678	Bank	
City of Belleview	5343 SE Utshipf Blud, Bellevin, Fr	Municipality	
	3400		
If during the disclosure period (a) you owned, directly or indirectly, in excess of 5% of the total assets or capital stock of any business entity, AND (b) if you received in excess of 10% of your gross income from the business entity, please list below every source of income to the business entity which exceeded in value ten percent (10%) of the business entity's gross income (computed on the basis of the business entity's fiscal year). You are NOT required in this part to list sources of income to a business entity if you received less than \$1,500 from the business entity during the disclosure period. A "source" in this part refers to any customer, client, or other category of income production which meets the minimum percentage requirements noted above. If continued on a separate sheet, please check here O			
NAME OF SOURCE OF BUSINESS ENTITY'S INCOME	ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
NOVE	444444		
100,			
PART C — GIFTS [Required by Florida Statutes § 112.3145(3)(d)] Please list below the name, address, and principal business activity of all persons, business entities, or other organizations from whom you received any gift or gifts the total of which exceeded \$100 from any one source during the disclosure period. Your benefactors must be listed in descending order of value with the largest source first. If you have received a preferential interest rate substantially below the customary and usual rate charged at the time the debt was incurred, the difference between the preferential and customary rate is deemed to be a gift. You are NOT required to list gifts received from your parent, grandparent, sibling, child, spouse, or from a spouse of any of the foregoing; gifts received by bequest or devise, or campaign contributions; or gifts representing an expression of sympathy and having no material benefit. ELECTED STATE, COUNTY, DISTRICT, AND MUNICIPAL OFFICERS are required to disclose gifts they have received on Form 7, Gifts and Other Non-Campaign Contributions, pursuant to §112.3148, F.S., and need not complete this part. If continued on a separate sheet, please check here □.			
NAME	ADDRESS	DESCRIPTION OF THE PRINCIPAL BUSINESS ACTIVITY	
. MB			
A / With			

PART D — REAL PROPERTY [Required by Florida Please list below the location or legal description o at any time during the previous tax year in excess of sheet, please check here	f all real property in t	(3)(c)]. this state, excluding residence and vacation homes, in which you owned the property's most recently assessed value. If continued on a separate
NONE		3
7000		The control of the co
		The state of the s
		The control of the co
of your total assets. Intangible personal property m in a corporation or other business organization hat the property represents rather than its own intrinsi of incorporated or unincorporated companies, busin for the payment of money. Your general descriptions	leans money, all evide ving multiple owners ic value, such as: ce ness trusts or mutual should include the ty ample: Stock, Genera	which you hold an interest having a value in excess of ten percent (10%) lences of debt owed to the reporting person, all evidences of ownerships, and all other forms of property where value is based upon that which rtificates of deposit, checks, bills of exchange, drafts, stocks or shares funds, beneficial interests in a trust, notes, bonds, and other obligations pe of property as noted above and, if applicable, the name of the business al Motors; Cash or Certificate of Deposit, First National Bank of Metropolis, t, please check here \Box .
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES	
Savings	South Trust Bank	
which exceeded your net worth. You are not require	reditor to whom you ed to list the amount tallment accounts; t	I were indebted at any time during the disclosure period in an amount of any indebtedness or your net worth. The following are excluded from axes owed; indebtedness on a life insurance policy owed to the company
NAME OF CREDITOR		ADDRESS OF CREDITOR
NONE		
JU V 12		
	PART G —	SIGNATURE
SIGNATURE LEWELT RUDGE PART H - FILING INST		DATE SIGNED May 15, 199 RUCTIONS FOR FORM 1

WHO MUST FILE: All state officers, local officers, candidates for state or local elective office, and specified state employees (other than officers of the judicial branch), as defined in Section 112.3145(1), Florida Statutes, and listed on the attached cover sheet and in the brochure entitled "Guide to the Sunshine Amendment and Code of Ethics for Public Officers and Employees," available from the Commission on Ethics, Supervisors of Elections, and Department of State. Persons required to file full disclosure (Form 6) are not required to file this form.

WHEN TO FILE: Candidates for publicly-elected state or local office must file financial disclosure together with and at the same time they file their qualifying papers. State and local officers and specified state employees are required to file by July 1st of each year. Each state or local officer who is appointed and each specified state employee who is employed must file disclosure within 30 days from the date of appointment or the beginning of

employment. Those appointees requiring Senate confirmation must file prior to confirmation.

WHERE TO FILE: A candidate files this form together with and as a part of his qualifying papers. A local officer files with the Supervisor of Elections of the county in which he permanently resides. A state officer or specified state employee files with the Department of State, Room 1801, The Capitol, Tallahassee, Florida 32399.

MULTIPLE FILING UNNECESSARY: Any person who files a statement of financial interests for any calendar or fiscal year is not required to file a second disclosure for the same year or any part thereof, except that any public officer who qualifies as a candidate shall file a copy of his disclosure with the officer before whom he qualifies at the time he qualifies.

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES \$112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: DISQUALIFICATION FROM BEING ON THE BALLOT, IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$5,000.