

#105582089

RECEIVED
CITY OF OCALA
FLORIDA

2005

FORM 1 F

FINAL STATEMENT OF
FINANCIAL INTERESTS

(TO BE FILED WITHIN 60 DAYS OF LEAVING PUBLIC OFFICE OR EMPLOYMENT)

06 JAN -6 PM 4:37

CITY CLERK

LAST NAME — FIRST NAME — MIDDLE NAME:

ERgle, GERALD K.

NAME OF REPORTING PERSON'S AGENCY:

City of Ocala

MAILING ADDRESS:

3631 SE 12th Pl.

CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):

- LOCAL OFFICER STATE OFFICER
- SPECIFIED STATE EMPLOYEE

OCALA

34471

MARION

LIST OFFICE OR POSITION HELD: MAYOR

CITY:

ZIP:

COUNTY:

BOTH PARTS OF THIS SECTION MUST BE COMPLETED

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2005 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS 12/06/05, 2005. (Date must be prior to 12/31/05)

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 (check one):

- COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
ERgle Const. Co. Inc.	3631 SE 12 th Pl.	Bldg Const.

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
Bobcat Kubota of Ocala	SALE TRACTOR/MACHINES	5215 W Hwy 40	SALE TRACTORS
Compass Health & Fitness	Many clients	524 S. Pine	Health & Fitness

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]

Residential Rental	17950 N Hwy 306 Citra
Warehouse Rental	2931 NW 8 th Pl
" "	2515 NW 10 th St.
Store Bldg - Lease	Insect SR 41 + 326 Morriston, FL

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 of this packet.

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

#105582089

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]
TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

N.A.	

PART E — LIABILITIES [Major debts]
NAME OF CREDITOR ADDRESS OF CREDITOR

WACOIA BANK	2001 SW 17 th ST
Am-South Bank	1700 SE 17 th ST

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	Eagle Const. Co. Inc		
ADDRESS OF BUSINESS ENTITY	3631 SE 12 th PL		
PRINCIPAL BUSINESS ACTIVITY	Bldg const		
POSITION HELD WITH ENTITY	Pres.		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes		
NATURE OF MY OWNERSHIP INTEREST			

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE

Donald K Eagle

DATE SIGNED:

12/12/05

FILING INSTRUCTIONS:

WHAT TO FILE:

After completing all parts of this form on pages 1 and 2, including signing and dating it, send back only the first sheet for filing (you need not return any of the instruction pages).

WHEN TO FILE:

At the end of office or employment each local officer, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment, unless you take another position within the 60-day period that requires you to file financial disclosure on Form 1 or Form 6.

WHERE TO FILE:

Local officers: file with the Supervisor of Elections of the county in which you 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.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

NOTE:

If you are leaving office or employment during the first half of 2005, you may not have filed Form 1 for 2004. In that case, this is not the last form you will file, even though the Form 1F covers the final portion of your term of office or employment. You will be required to file Form 1 for 2004 by July 1 of 2005.