

FINAL STATEMENT OF FINANCIAL INTERESTS

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

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CITY OF OCALA, FLORIDA  
CITY CLERK

LAST NAME — FIRST NAME — MIDDLE NAME: 105553964  
KAY KYLE ANDREWS

MAILING ADDRESS:  
5011 65<sup>th</sup> Ave

CITY: Ocala, FL ZIP: 34470 COUNTY: MARION

NAME OF REPORTING PERSON'S AGENCY:  
CITY OF OCALA, FLORIDA  
CITY CLERK

CHECK ONE OF THE FOLLOWING (see "Who Must File" on page 3):  
 LOCAL OFFICER     STATE OFFICER  
 SPECIFIED STATE EMPLOYEE

LIST OFFICE OR POSITION HELD: \_\_\_\_\_

\*\*\*BOTH PARTS OF THIS SECTION MUST BE COMPLETED\*\*\*

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS MY FINANCIAL INTERESTS FOR THE PERIOD BETWEEN JANUARY 1, 2009 AND THE LAST DATE I HELD THE PUBLIC OFFICE OR EMPLOYMENT DESCRIBED ABOVE, WHICH DATE WAS 12-01-, 2009. (Date must be prior to 12/31/09)

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
<u>Ocala N. Bank</u>	<u>3001 65<sup>th</sup> MARICAMP RD Ocala FL</u>	<u>Comm. Bank</u>
<u>Spending Props of Ocala</u>	<u>same</u>	<u>R/E INVEST. Co.</u>

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

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

<u>Spending Props of Ocala</u>	<u>3001 65 MARICAMP</u>
<u>Homesite</u>	<u>5011 65<sup>th</sup> Ave</u>
<u>Spending Props of Ocala</u>	<u>1.4 acres N 441. Pr</u>

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 pages of this packet.

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

105553964

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
ONLY Financial Svcs. Operating Program of Capital	Capital NPY stock 15% ownership 50% ownership

PART E — LIABILITIES [Major debts]	
NAME OF CREDITOR	ADDRESS OF CREDITOR
Bank of America	Raleigh, NC
Regions Bank	Birmingham, AL
1st Community Bank	Jacksonville, FL

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	ONLY FINAN. Svcs. Operating Program	Operating Program	PLIC Partnership
ADDRESS OF BUSINESS ENTITY	3001 63rd Mallcom Rd.	same address	same address
PRINCIPAL BUSINESS ACTIVITY	Bank Hold Co.	PLIC INVEST Co.	PLIC INVEST.
POSITION HELD WITH ENTITY	Director	Partner	Partner
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	yes	yes	yes
NATURE OF MY OWNERSHIP INTEREST			

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

SIGNATURE: *[Signature]* DATE SIGNED: Feb 15, 2010

**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 pages 1 and 2 for filing (you need not return any of the instruction pages). Facsimiles will not be accepted.

**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 he or she takes another position within the 60-day period that requires filing 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 2009, you may not have filed Form 1 for 2008. 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 2008 by July 1 of 2009.