

# FORM 1

# STATEMENT OF FINANCIAL INTERESTS

2016

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

FOR OFFICE USE ONLY:

105772340

RECEIVED  
 2017 JUL -7 PM 3:59  
 SUPERVISOR OF ELECTIONS  
 MARION COUNTY, FLORIDA

LAST NAME -- FIRST NAME -- MIDDLE NAME :  
 Bianculli Richard

MAILING ADDRESS :  
 3080 SW 53rd Street

CITY : Ocala ZIP : 34471 COUNTY : Marion

NAME OF AGENCY :  
 Marion County Hospital District

NAME OF OFFICE OR POSITION HELD OR SOUGHT :  
 Trustee

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, 2016 OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: \_\_\_\_\_

**MANNER OF CALCULATING REPORTABLE INTERESTS:**

FILERS HAVE 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). CHECK THE ONE YOU ARE USING (must check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR  DOLLAR VALUE THRESHOLDS

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

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Bianculli Brother & Associates	44 SE 1st Ave., STE 207 Ocala, FL, 34471	Rental Income
Richmond Hill Capital Partners	44 SE 1st Ave., STE 207 Ocala, FL, 34471	Investment Income
See Addendum		

**PART B -- SECONDARY SOURCES OF INCOME**

[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

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 - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

545 SW 131st Street, Ocala, FL 34481
47 Magnolia Ave., Yankeetown, FL 34491
See Addendum

**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.

**PART D — INTANGIBLE PERSONAL PROPERTY** [Stocks, bonds, certificates of deposit, etc. - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
See Addendum	

**PART E — LIABILITIES** [Major debts - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
Wells Fargo	

**PART F — INTERESTS IN SPECIFIED BUSINESSES** [Ownership or positions in certain types of businesses - See instructions]  
 (If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
	Richmond Hill Capital Partners	See Addendum
ADDRESS OF BUSINESS ENTITY	44 SE 1st Ave., Ocala, FL 34471	
PRINCIPAL BUSINESS ACTIVITY	Investment Income	
POSITION HELD WITH ENTITY	Partner	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes	
NATURE OF MY OWNERSHIP INTEREST	Equity	

**PART G — TRAINING**

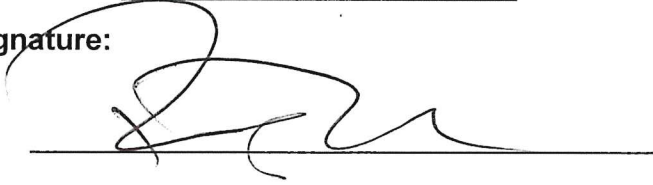
For elected municipal officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

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

**SIGNATURE OF FILER:**

Signature:



Date Signed:

7/07/17

**CPA or ATTORNEY SIGNATURE ONLY**

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, \_\_\_\_\_, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

**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, write "none" or "n/a" in that section(s).

**NOTE:**

**MULTIPLE FILING UNNECESSARY:**

A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

Facsimiles will not be accepted.

**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: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

**Candidates** file this form together with their qualifying papers.

To determine what category your position falls under, see page 3 of instructions.

**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** must file at the same time they file their qualifying papers.

**Thereafter**, file by July 1 following each calendar year in which they hold their positions.

**Finally**, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2016.

Addendum

Part A:

Arrowpoint Income Opportunity Fund	100 Fillmore Street, STE 325, Denver, CO 80206	Passive Investment
Ovation Alternative Income Fund	805 Las Cimas Parkway STE 350, Austin, TX 78746	Passive Investment
AFF Loan Pool	2100 Powers Ferry Road, STE 350, Atlanta, GA 30333	Passive Investment
Ardent Financial Fund	2100 Powers Ferry Road, STE 350, Atlanta, GA 30333	Passive Investment
Ardent Financial Fund II	2100 Powers Ferry Road, STE 350, Atlanta, GA 30333	Passive Investment
Davidson Kempner	520 Madison Ave., 30 <sup>th</sup> Floor, New York, NY 10022	Passive Investment
Golub Capital Partners VII	666 Fifth Ave., New York, NY 10103	Passive Investment
Golub Capital Partners X	666 Fifth Ave., New York, NY 10103	Passive Investments
OHA Newbury Partners	1114 Avenue of the Americas, 27 <sup>th</sup> Floor New York, NY 10036	Passive Investment
VPC Specialty Finance Fund I	50 S. LaSalle Street, LQ-9 Chicago, IL 60603	Passive Investment
Juniperus Insurance Opp. Fund	11 Church Street Hamilton HM 11 Bermuda	Passive Investment
GS Anchorage Illiquid Opp Access Fund	3414 Peachtree Road, NE STE 600, Atlanta, GA 30326	Passive Investment

Part C:

45 Magnolia Ave., Yankeetown, FL, 34491  
43 Magnolia Ave., Yankeetown, FL, 34491

Part D:

Stocks

Bonds

Private Equity

Private Equity

Private Equity

Personal

Personal

Bianculli Technology Fund

Mogean

Sustained Released Technologies

Part F:

Name of Entity	Bianulli Brother and Associates	RJ Aviation	Bianculli, Weisse and Weisse
Address of Entity	44 SE 1st Ave., Ocala, FL, 34471	44 SE 1st Ave., Ocala, FL, 34471	44 SE 1st Ave., Ocala, FL, 34471
Business Activity	Rental Income	Aviation charters	Rental Income
Position Held	Partner	Partner	Partner
> 5% interest	Yes	Yes	Yes
Nature of Ownership	Equity	Equity	Equity
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Name of Entity	Bianculli Brothers Technology Fund		
Address of Entity	44 SE 1st Ave., Ocala, FL, 34471		
Business Activity	Investment Income		
Position Held	Partner		
> 5% interest	Yes		
Nature of Ownership	Equity		