FORM 1	STATEMENT OF	2013
Please print or type your name, mailing address, agency name, and position by	• FINANCIAL INTERESTS	FOR OFFICE USE ONLY:
LAST NAME FIRST NAME N	DDLE NAME :	
MAILING ADDRESS :		
	,	•
CITY:	ZIP: COUNTY:	
NAMF Ronald Jacobs 2394		
NAME 1700 Nw 93rd Ter	HIP	
Plantation FL 33322	TATAL PROPERTY OF THE PROPERTY	
Plantation	ch additional sheets, if necessary.	
CHECA-CIVET III LE CANUIDA	· · · · · · · · · · · · · · · · · · ·	
**** BC	TH PARTS OF THIS SECTION MUST BE COMP	1
DISCLOSURE PERIOD:		
YEAR OR ON A FISCAL YEAR. EITHER (must check one):	OUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, W PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE	HETHER BASED ON A CALENDAR PRECEDING TAX YEAR ENDING
DECEMBER 3	, 2013 OR OSPECIFY TAX YEAR IF OTHER THAN T	THE CALENDAR YEAR:
MANNER OF CALCULATING	REPORTABLE INTERESTS:	,
FILERS HAVE THE OPTION OF CALCULATIONS, OR USING CO for further details). CHECK THE	JSING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR MPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PE	VALUES, WHICH REQUIRES FEWER RCENTAGE VALUES (see instructions
		VALUE THRESHOLDS
PART A PRIMARY SOURCES O	INCOME [Major sources of income to the reporting person - See instruction	
(If you have nothing to	report, write "none" or "n/a")	onsj
NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
rama illp	1700 NW 93 TER PLANTAGE FL TU	VESTMENTS REAL & INAMERICA
PART B SECONDARY SOURCE [Major customers, clien (If you have nothing to	S OF INCOME s, and other sources of income to businesses owned by the reporting person report, write "none" or "n/a")	- See instructions]
NAME OF	NAME OF MAJOR SOURCES ADDRESS	PRINCIPAL BUSINESS
BUSINESS ENTITY  MO ME	OF BUSINESS' INCOME OF SOURCE	ACTIVITY OF SOURCE
100100		
PART C REAL PROPERTY II an	, buildings owned by the reporting person - See instructions]	
(If you have nothing to	LING INSTRUCTIONS for when nd where to file this form are	
NONE	lo	cated at the bottom of page 2.
	th th	ISTRUCTIONS on who must file is form and how to fill it out
The state of the s	be	egin 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			
PARTIVERSHIP	(NTEREST	R2M2	LLLP		
-1/2		The state of the s	· · · · · · · · · · · · · · · · · · ·		
		-1			
	[Major debts - See instructions nothing to report, write "non				
NAME O	NAME OF CREDITOR ADDRESS OF CREDITOR				
NONE					
	SPECIFIED BUSINESSES [		s in certain types of b	usinesses - See instructions]	
(If you have n	othing to report, write "none"		S ENTITY # 1	BUSINESS ENTITY # 2	
NAME OF BUSINESS ENTI	TY				
ADDRESS OF BUSINESS E	ENTITY				
PRINCIPAL BUSINESS ACT	[IVITY				
POSITION HELD WITH EN	ПТУ				
I OWN MORE THAN A 5% I	NTEREST IN THE BUSINESS				
NATURE OF MY OWNERS	HIP INTEREST				
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE (red	<u>quired):</u>	DATE SIGNED (required):			
Rosal	Jun	, m	JUNE 2,	, 2013	
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:					
	J	, prepared to reasonable knowled	he CE Form 1 in a ge and belief, the dis	accordance with Section 112.3145, Florida sclosure herein is true and correct.	
Sin	nature	· · · · · · · · · · · · · · · · · · ·	<u> </u>	Date	
FILING INSTRUCTIONS:					
WHAT TO FILE:	•	HERE TO FILE:	OCHOIN.	WHEN TO FILE:	

# VVMAL 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).

### 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.

#### wacke io 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 the "Who Must File" Instructions on page 3.

Facsimiles will not be accepted.

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. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2013.