FORM 1	FORM 1 STATEMENT OF		- -	2007	
© Please print of type your name, mailing addreas, agency name, and position balow:			· [
TASTNAME - FIRST NAME - MIDDLE N MEEK KENNETK MAILING ADDRESS :	· · ·	FOR OF USE ON			
EALLALINA	EL AVENUE 32404 B:	AU		de	
	ZIP : COUNTY :		ID No	1.	
ALVE OF NOENCE : A. I. T. O. F. C. H.L. A. A. U.A. Y. NAME OF ORFICE OR POSITION HELD OR SOUGHT:			Canf. Code P. Reg. Code		
MAYOR You are not limited to the space on the lines of CHECK ONLY IF CANDIDATE OF					
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINU A FISCAL YEAR. PLEASE STATE BELOW DECEMBER 31, 2007 MANNER OF CALCULATING REPORTAB THE LEGISLATURE ALLOWS FILLERS T REQUIRES FEWER CALCULATIONS, OF Instructions for further datalis). PLEASE S COMPARATIVE (PERCENTAGE) T	WHETHER THIS STATEMENT IS . <u>OB</u> SPECIFY T LE INTERESTS: HE OPTION OF USING REPORT (USING COMPARATIVE THRESH (ATE BELOW WHETHER THIS STA	ECEDING TAX YEAR, WHETH FOR THE PRECEDING TAX Y TAX YEAR IF OTHER THAN TI TING THRESHOLDS THAT A IOLDS, WHICH ARE USUALL ATEMENT REFLECTS EITHER	EAR END HE CALE! RE ABSC Y BASED (chock of	ING EITHER (check one): NDAR YEAR: DLUTE DOLLAR VALUES, WHICH ON PERCENTAGE VALUES (see	
PART A - PRIMARY SOURCES OF INCOME [Major sources of income to the reparting person NAME OF SOURCE SOURCE'S OF INCOME ADDRESS		RCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
LOOKIN GOOD, LLC 1535 S. HIMBRELAVE, CALLAGE			yFL33409 PRESSURE CLEANING		
PART E - SECONDARY SOURCES OF NAME OF BUSINESS ENTITY	NCOME (Major customers, clients, NAME OF MAJOR SOURCES OF BUSINESS' INCOME	and other sources of income to ADDRESS OF SOURCE	business	es owned by the reporting person] PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
CITY OF CHALHWAY		CALLAWAY, FL	3240	MAYOR	
				1	
PART C - REAL PROPERTY [Land, buildings cwned by the reporting person]			FILING INSTRUCTIONS for when and where to file this form are locat- ed at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.		
			OTHER FORMS you may need to file are described on page 6.		
CE FORM 1 - Eff. 1/2008 (Continued on reverse side)				PAGE 1	