

FORM 6 FULL AND PUBLIC DISCLOSURE OF 2007

FINANCIAL INTERESTS

JUN 19 2008 PM 12:15

LAST NAME — FIRST NAME — MIDDLE NAME:
 Fisher, Jr. William Earl

MAILING ADDRESS:
 2437 McGraw Lane

CITY: ZIP: COUNTY:
 Panama City 32405 Bay

NAME OF AGENCY:
 Bay County Board of County Commissioners

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
 County Commissioner

CHECK IF THIS IS A FILING BY A CANDIDATE

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

PART A — NET WORTH

Please enter the value of your net worth as of December 31, 2007, or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of December, 20 07 was \$ 372,000.00.

PART B — ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:
 Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use.

The aggregate value of my household goods and personal effects (described above) is \$ 75,000.00

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
Business: AAA Advanced Air & Mold Solutions Inc	55,000.00
Residence: 2437 McGraw Lane, Panama City, FL 32405	190,000.00
Land: On McGraw Lane	125,000.00
Truck:	35,000.00

PART C — LIABILITIES

LIABILITIES IN EXCESS OF \$1,000:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Beneficial 651 West 23rd Street, Panama City, FL 32405	93,000.00
Beneficial 651 West 23rd Street, Panama City, FL 32405	15,000.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
N/A	
N/A	
N/A	

PART D -- INCOME

You may *EITHER* (1) file a complete copy of your 2007 federal income tax return, including all attachments, *OR* (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D, below.

I elect to file a copy of my 2007 federal income tax return. [If you check this box and attach a copy of your 2007 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME:

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
AAA Advanced Air & Mold Solutions Inc	2437 McGraw Lane, Panama City, FL. 32405	51,900.00

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

PART E -- INTERESTS IN SPECIFIED BUSINESSES

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	AAA Advanced Air & Mold Inc		
ADDRESS OF BUSINESS ENTITY	2437 McGraw LN, P.C.FL.		
PRINCIPAL BUSINESS ACTIVITY	Mold Inspection & Remediation		
POSITION HELD WITH ENTITY	Owner		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100%		
NATURE OF MY OWNERSHIP INTEREST	Owner		

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

OATH

STATE OF FLORIDA
COUNTY OF Bay

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

Sworn to (or affirmed) and subscribed before me this 19 day of

June, 2008 by William E. Fiske Jr.

Paul Harry Zimmerman II
(Signature of Notary Public--State of Florida)

NOTARY PUBLIC STATE OF FLORIDA
Paul Harry Zimmerman, II
(Print, Type, or Stamp Commission No. 746199 Notary Public)

Expires: APR. 13, 2012
Personally Known AND/OR IDENTIFICATION

William E. Fiske Jr.
SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

Type of Identification Produced _____

FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.
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.