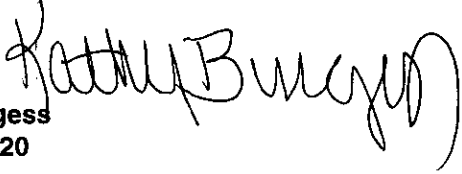


Kathy Burgess Resignation 01-25-10

12:22 PM 1/25/2010

I hereby resign my position as primary campaign treasurer for the Sonny Haas campaign.

The resignation is effective immediately.

A handwritten signature in black ink that reads "Kathy Burgess". The signature is written in a cursive style with a large, looping initial "K" and a large, rounded "B".

**Kathy Burgess
239-770-2820**

SONNY



for

County Commission District 2
"How may I serve you"

01-31-10

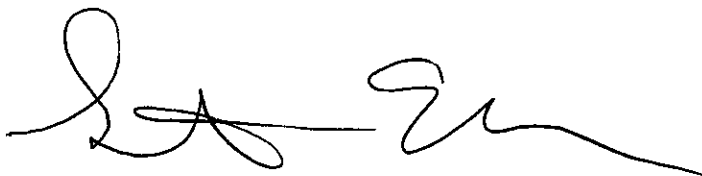
Bernie Feliciano

Bernie,

Please except this letter of dismissal regarding Cathy Burgess. In December of last year we both decided that it would be in the best interest of the campaign that she should step down from her duties as treasurer. We both agreed that she would complete the next financial report due and that she would then leave the campaign staff. If you have any questions, please don't hesitate to call.

10FEB01PM0400 SDE Lee Co Fl

Best regards, Sonny.

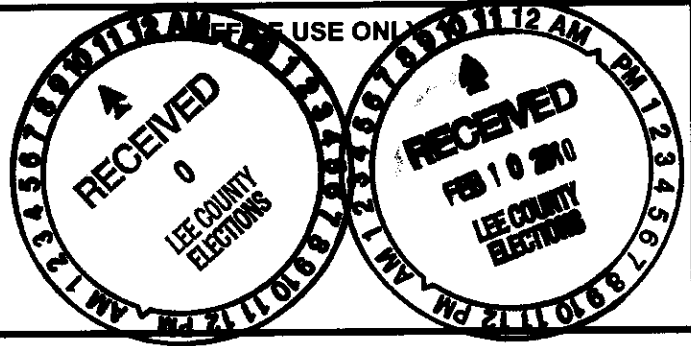


Steven Patrick Haas

P.O. Box 60603 • Fort Myers, FL 33906 • Mobile (239) 707-0516 • Email: sonny.haas@yahoo.com • Lic. #024283

STATE OF FLORIDA
 APPOINTMENT OF CAMPAIGN TREASURER
 AND DESIGNATION OF CAMPAIGN
 DEPOSITORY FOR CANDIDATES
 (Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)



1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Sonny Haas

3. Address (include post office box or street, city, state, zip code)

*1403 W 17th St LA 33972
 P.O. Box 60603 FM 33906*

4. Telephone (optional)

(239) 707-0516

5. E-mail address (optional)

Sonny.haas@yahoo.com

6. Office sought (include district, circuit, group number)

Lee Co. Commission Dist 2

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation *REPUBLICAN* Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Joann Ellis

11. Mailing Address (If post office box or drawer, also include street address)

242 Brookside St

12. Telephone

(239) 462-3858

13. City

LEHIGH ACRES

14. County

Lee

15. State

FL

16. Zip Code

33936

17. E-mail address (optional)

joannellis@yahoo.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

SUNTRUST

20. Street Address

MERCHANT'S CROSSING

21. City

NORTH FORT MYERS

22. County

LEE

23. State

FL

24. Zip Code

33903

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

2-9-10

26. Signature of Candidate

X [Signature]

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, *JOANN ELLIS*, do hereby accept the appointment

(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

2/9/10

Date

X [Signature]

Signature of Campaign Treasurer or Deputy Treasurer