

FORM 6 FULL AND PUBLIC DISCLOSURE OF

2005

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

FINANCIAL INTERESTS

LAST NAME — FIRST NAME — MIDDLE NAME:
Cole Robert Patrick

FOR OFFICE USE ONLY:

MAILING ADDRESS:
17105 Sweetwater Rd.

Dade City 33523 Palco

CITY: ZIP: COUNTY:

NAME OF AGENCY:
County Court Judge

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
Group 2

CHECK IF THIS IS A FILING BY A CANDIDATE

RECEIVED
 06 MAY - 8 PM 2: 20
 KURT S. BROWNING
 SUPERVISOR OF ELECTIONS
 DADE COUNTY
 FLORIDA

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2005, 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 5/2 20 06 was \$ 868,218.

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 \$ 100,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
<i>Residence - 17105 Sweetwater Rd. Dade City, Fl</i>	<i>300,000</i>
<i>VACATION house 2079 Schooner Dr. Ocala, Fl</i>	<i>200,000</i>
<i>vehicles and boat RC included in household goods Above</i>	<i>5,000</i>
<i>F.A. Sima Retirement DROP subject to income tax</i>	<i>288,499</i>
<i>Deferreal Compensation IRG</i>	<i>185,921</i>

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
<i>SUNCOAST Schools FCU PO Box 11829 Tampa, Fl</i>	<i>175,157.49</i>
<i>First Union BANK PO Box 5005 Roanoke, VA</i>	<i>18,367.34</i>
<i>SUNCOAST Schools FCU (ULSA) PO Box 11904, Tampa</i>	<i>15,678.31</i>

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
<i>NONE</i>	

PART D -- INCOME

You may *EITHER* (1) file a complete copy of your 2005 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 2005 federal income tax return. (If you check this box and attach a copy of your 2005 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
<i>None</i>		

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
<i>None</i>			

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PART E -- INTERESTS IN SPECIFIED BUSINESSES

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	<i>None</i>		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
DO I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

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

OATH

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.

[Signature]
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA
 COUNTY OF DADE

Sworn to (or affirmed) and subscribed before me this 2 day of

May, 2006 by Robert P. Cole

[Signature]
 (Signature of Notary Public - State of Florida)
Lisa Schultz
 Commission # DD534543
 Expires March 29, 2010

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known OR Produced Identification

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.

Form 1040 U.S. Individual Income Tax Return 2005

(99) IRS Use Only - Do not write or staple in this space.

Label (See instructions on page 16.) Use the IRS label. Otherwise, please print or type.

Header section containing personal information: Name (ROBERT COLE), Spouse (CHRISTINE), Address (17105 SWEETWATER ROAD, DADE CITY, FL 33525), and Social Security Numbers.

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Presidential Election Campaign

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 16)

Filing Status

Filing status options: 1 Single, 2 Married filing jointly (checked), 3 Married filing separately, 4 Head of household, 5 Qualifying widow(er).

Exemptions

Exemptions section: 6a Yourself (checked), 6b Spouse (checked), 6c Dependents (MICHAEL COLE SON, JULIE COLE OTHER), 6d Total number of exemptions claimed (4).

Income

Income section: 7 Wages (159,897), 8a Taxable interest (92), 9a Ordinary dividends, 10 Taxable refunds, 11 Alimony received, 12 Business income, 13 Capital gain, 14 Other gains, 15a IRA distributions, 16a Pensions and annuities, 17 Rental real estate, 18 Farm income, 19 Unemployment compensation, 20a Social security benefits, 21 Other income, 22 Total income (159,989).

Adjusted Gross Income

Adjusted Gross Income section: 23 Educator expenses, 24 Business expenses, 25 Health savings account deduction, 26 Moving expenses, 27 Self-employment tax, 28 Self-employed SEP, SIMPLE, and qualified plans, 29 Self-employed health insurance deduction, 30 Penalty on early withdrawal, 31a Alimony paid, 32 IRA deduction, 33 Student loan interest deduction, 34 Tuition and fees deduction, 35 Domestic production activities deduction, 36 Add lines 23 through 31a and 32 through 35, 37 Adjusted gross income (159,989).

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Form 1040 (2005) **ROBERT & CHRISTINE COLE**

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	159,989
	39a	Check <input type="checkbox"/> You were born before January 2, 1941, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1941, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here <input type="checkbox"/> 39b		
	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	11,682
	41	Subtract line 40 from line 38	41	148,307
	42	If line 38 is over \$109,475, or you provided housing to a person displaced by Hurricane Katrina, see page 37. Otherwise, multiply \$3,200 by the total number of exemptions claimed on line 6d	42	12,800
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	135,507
	44	Tax (see page 37). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	27,673
	45	Alternative minimum tax (see page 39). Attach Form 6251	45	
	46	Add lines 44 and 45	46	27,673
	47	Foreign tax credit. Attach Form 1116 if required	47	
	48	Credit for child and dependent care expenses. Attach Form 2441	48	
	49	Credit for the elderly or the disabled. Attach Schedule R	49	
	50	Education credits. Attach Form 8863	50	
	51	Retirement savings contributions credit. Attach Form 8880	51	
	52	Child tax credit (see page 41). Attach Form 8901 if required	52	
	53	Adoption credit. Attach Form 8839	53	
	54	Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8859	54	
	55	Other credits. Check applicable box(es): a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form	55	
	56	Add lines 47 through 55. These are your total credits	56	
	57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-	57	27,673
Other Taxes	58	Self-employment tax. Attach Schedule SE	58	
	59	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	59	
	60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	
	61	Advance earned income credit payments from Form(s) W-2	61	
Payments	62	Household employment taxes. Attach Schedule H	62	
	63	Add lines 57 - 62. This is your total tax	63	27,673
	64	Federal income tax withheld from Forms W-2 and 1099	64	24,797
	65	2005 estimated tax payments and amount applied from 2004 return	65	
	66a	Earned income credit (EIC)	66a	
	b	Nontaxable combat pay election <input type="checkbox"/> 66b		
	67	Excess social security and tier 1 RRTA tax withheld (see page 59)	67	
	68	Additional child tax credit. Attach Form 8812	68	
	69	Amount paid with request for extension to file (see page 59)	69	
	70	Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	70	
	71	Add ln. 64, 65, 66a, & 67 - 70. These are your total payments	71	24,797
Refund	72	If line 71 is more than line 63, subtract line 63 from line 71. This is the amount you overpaid	72	
	73a	Amount of line 72 you want refunded to you	73a	
	b	Routing number <input type="text"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account number <input type="text"/>		
	74	Amount of line 72 you want applied to your 2006 estimated tax	74	
Amount You Owe	75	Amount you owe. Subtract line 71 from line 63. For details on how to pay, see page 60	75	2,881
	76	Estimated tax penalty (see page 60)	76	

Standard Deduction for-

- People who checked any box on line 39a or 39b or who can be claimed as a dependent, see page 36.
- All others:
 - Single or Married filing separately, \$5,000
 - Married filing jointly or Qualifying widow(er), \$10,000
 - Head of household, \$7,300

If you have a qualifying child, attach Schedule EIC.

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 SUPERVISOR OF ELECTIONS
 SAN ANTONIO, TEXAS

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Third Party Designee Do you want to allow another person to discuss this return with the IRS (see page 61)? Yes. Complete the following. No

Designee's name **PREPARER** Personal identification number (PIN) Phone no.

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature *[Signature]* Date *3/21/06* Occupation **JUDGE** Daytime phone number

Spouse's signature. If a joint return, both must sign. Date Spouse's occupation **TEACHER**

Preparer's Use Only Preparer's signature *[Signature]* Date **3/21/06** Check if self-employed Preparer's SSN or PTIN **P00049497**

Firm's name (or yours if self-employed), address, and ZIP code **NEWLON SERVICES, P.A. PO BOX 907 SAN ANTONIO FL 33576-0907** EIN **59-3689428** Phone no. **352-588-3844**

**SCHEDULES A&B
(Form 1040)**

Schedule A-Itemized Deductions

(Schedule B is on back)

OMB No. 1545-0074

2005

Attachment Sequence No. **07**

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040. ▶ See instructions for Schedules A & B (Form 1040).

Name(s) shown on Form 1040

ROBERT & CHRISTINE COLE

Your social security number

Medical and Dental Expenses	Caution. Do not include expenses reimbursed or paid by others.		
	1	Medical and dental expenses (see page A-2)	1
	2	Enter amt. from Form 1040, line 38 2	
	3	Multiply line 2 by 7.5% (.075)	3
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4
Taxes You Paid (See page A-2.)	5 State and local (check only one box):		
	a	<input type="checkbox"/> Income taxes, or	5
	b	<input checked="" type="checkbox"/> General sales taxes (see page A-3)	6
	6	Real estate taxes (see page A-5)	7
	7	Personal property taxes	8
	8	Other taxes. List type and amount ▶	
	9	Add lines 5 through 8	9
Interest You Paid (See page A-5.)	10	Home mortgage interest and points reported to you on Form 1098	10
	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-6 and show that person's name, identifying no., and address ▶	
	11		
	12	Points not reported to you on Form 1098. See page A-6 for special rules	12
	13	Investment interest. Attach Form 4952 if required. (See page A-6.)	13
	14	Add lines 10 through 13	14
			7,716
Gifts to Charity If you made a gift and got a benefit for it, see page A-7.	15a	Total gifts by cash or check. If you made any gift of \$250 or more, see page A-7	15a
	15b	Gifts by cash or check after August 27, 2005, that you elect to treat as qualified contributions (see page A-7)	15b
	16	Other than by cash or check. If any gift of \$250 or more, see page A-7. You must attach Form 8283 if over \$500	16
	17	Carryover from prior year	17
	18	Add lines 15a, 16, and 17	18
			100
Casualty and Theft Losses	19	Casualty or theft loss(es). Attach Form 4684. (See page A-8.)	19
Job Expenses and Certain Miscellaneous Deductions (See page A-8.)	20	Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-8.) ▶	20
	21	Tax preparation fees	21
	22	Other expenses—investment, safe deposit box, etc. List type and amount ▶	22
	23	Add lines 20 through 22	23
	24	Enter amt. from Form 1040, line 38 24 159,989	24
	25	Multiply line 24 by 2% (.02)	25
	26	Subtract line 25 from line 23. If line 25 is more than line 23, enter -0-	26
			0
Other Miscellaneous Deductions	27	Other—from list on page A-9. List type and amount ▶	27
Total Itemized Deductions	28	Is Form 1040, line 38, over \$145,950 (over \$72,975 if married filing separately)? <input type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 27. Also, enter this amount on Form 1040, line 40. <input checked="" type="checkbox"/> Yes. Your deduction may be limited. See page A-9 for the amount to enter.	28
			11,682
	29	If you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/>	

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 THE CITY OF MINNAPOLIS