



Absences in past 12 months _____
Chair verified _____
(For office use only)

APPLICATION TO SERVE ON A CHARLOTTE COUNTY ADVISORY COMMITTEE

☒ New Applicant ☐ Re-Appointment

INCOMPLETE APPLICATIONS WILL BE RETURNED

| | | | |
|---------------------------|-------------------|-----------------|-----------------------|
| Mr/Mrs/Ms: | Ryals | James | L |
| Name: | Last | First | Middle Initial |
| Residence Address: | | | |
| 10424 SW Boggess Ave | | Arcadia | 34269 |
| Street | City | | Zip Code |
| Mailing Address: | | | |
| 10424 SW Boggess Ave | | Arcadia | 34269 |
| Street | City | | Zip Code |
| Phone No. | (863) 558-0287 | | |
| | Home | Business | |
| FAX: | | | |
| E-Mail Address: | jlryals@yahoo.com | | |

I hereby submit my name for consideration to serve in an advisory capacity to the Board of Charlotte County Commissioners on the following Advisory Committee as a ☐ Regular or ☐ Alternate member:

ANRAC

Name of Advisory Committee

If applying for a specific category/position, please so state: _____

Occupation: Assistant Ranch Manager, Ryals Cattle Co.

If currently retired, previous occupation: _____

Civic/Professional Accomplishments/Offices Held:

Desoto/Charlotte Farm Bureau- Vice President

Desoto Cattlemens Association- President

Wedgworth Leadership Institute- Class 11

**APPLICATION TO SERVE ON A
CHARLOTTE COUNTY ADVISORY COMMITTEE – CONTINUED**

My qualifications to be eligible are as follows:

I have been an active participant in advocating for agriculture on the county, state, and federal levels. I have been also been involved with my family's cattle and melon operation for my entire adult life. Conservation has been a major priority of mine and has been something I have worked towards; recently within the RFLPP.

If applicable, please indicate any employment, contractual relationship or status that you may have, or have had within the past 12 months, with any private business entity that rents, leases or sells any realty, or provides any goods or services to the County or that is conducting any business with the County.

Is this application for a new appointment? ☒ Yes ☐ No

If yes, please indicate what you would like to accomplish if you are appointed to this Committee:

If I am appointed to this committee, I would like to continue advocating for protecting Charlotte County's

green spaces and waterways while continuing to allow agricultural operations to follow responsible practices.

Is this application for a re-appointment? ☐ Yes ☒ No

➤ If yes, please indicate what your accomplishments have been while serving on this Committee:

➤ If "Yes", please indicate what you would like to accomplish during this term:

If you have previously served on a Charlotte County Advisory Committee or are currently serving and seeking reappointment, please indicate the number and general nature of any voting conflict disclosure memorandum filed (Form 8B) while serving on the committee:

Have you ever worked for the Charlotte County Board of County Commissioners? ☐ Yes ☒ No

➤ If "Yes", please list position, department, start and end date: _____

Do you have any relatives currently working for the Charlotte County Board of County Commissioners? ☐ Yes ☒ No

➤ If "Yes", please list name(s) and department(s): _____

Are you a full time Charlotte County Resident? ☐ Yes ☒ No

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- 1.) All of the Boards and Committees appointed by the Board of County Commissioners are required to comply with the Sunshine Law FS 286.011 and some of the Boards and Committees appointed by the Board of County Commissioners are required to comply with Chapter 112, Florida Statutes, the Financial Disclosure Law. You may be required to file a Form 1 Financial Disclosure. You will be provided with more information upon appointment.
- 2.) Charlotte County, an equal opportunity/affirmative action employer, considers the selection and appointment of persons to advisory committees in a non-discriminatory manner consistent with the requirements of Federal, State and Local non-discrimination laws.
- 3.) The Board of County Commissioners request that you attend the Commission meeting at which your application will be considered for appointment. This office will notify you of the Commission meeting date.
- 4.) Members who fail to attend three (3) meetings in a twelve-month period without cause and without prior approval of the chairman shall automatically forfeit their appointment.

By signing this application, you acknowledge that you have read and understand the previous statements.

James L Ryals
Signature

3/10/25

Date

A résumé of additional personal and professional qualifications and experience that pertains to the above is to be submitted with this application; however, it cannot replace the application form.

Please return this completed form to:

Commission Office Administration
18500 Murdock Circle
Port Charlotte, FL 33948
or Email to:
executiveassistants@charlottecountyfl.gov