

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines CNL FINANCIAL GROUP INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 450 SOUTH ORANGE AVENUE SUITE 1400 ORLANDO FL 32801

2. FEC IDENTIFICATION NUMBER C00454314 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 10 16 2008 through 11 24 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Tammy Tipton

Signature of Treasurer Electronically Filed by Tammy Tipton Date 12 03 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
CNL FINANCIAL GROUP INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		10000.00
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	26750.00									
(c) Total Receipts (from Line 19)	9799.22	28549.22								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	36549.22	38549.22								
7. Total Disbursements (from Line 31)	16500.00	18500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20049.22	20049.22								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
CNL FINANCIAL GROUP INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	9515.00	28265.00
(i) Itemized (use Schedule A)	284.22	284.22
(ii) Unitemized	9799.22	28549.22
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	9799.22	28549.22
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	9799.22	28549.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9799.22	28549.22

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16500.00	18500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	16500.00	18500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16500.00	18500.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	9799.22	28549.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9799.22	28549.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CNL FINANCIAL GROUP INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Timothy J Manor	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 640 Dunblane Drive	Transaction ID: SA11AI.4124
	City State Zip Code Winter Park FL 32792	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Lowndes Drösdick Doster Kantor Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Paul S. Saint-Pierre	Date of Receipt MM / DD / YYYY 11 / 24 / 2008
	Mailing Address 176 E. Lake Sue Avenue	Transaction ID: SA11AI.4178
	City State Zip Code Winter Park FL 32789	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	\$15/biweekly
	Name of Employer Occupation CNL Financial Group, Inc. Senior Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

C.	Full Name (Last, First, Middle Initial) James J Seneff, Jr.	Date of Receipt MM / DD / YYYY 10 / 21 / 2008
	Mailing Address 450 S. Orange Avenue	Transaction ID: SA11AI.4127
	City State Zip Code Orlando FL 32801	Amount of Each Receipt this Period 4500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CNL Financial Group, Inc. CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

SUBTOTAL of Receipts This Page (optional)	9515.00
TOTAL This Period (last page this line number only)	9515.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CNL FINANCIAL GROUP INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) BILL NELSON FOR U S SENATE	Transaction ID: SB23.4131 Date of Disbursement
	Mailing Address 500 RED SAIL WAY	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City SATELITE BEACH State FL Zip Code 32937	Amount of Each Disbursement this Period
	Purpose of Disbursement <input type="text"/>	<input type="text" value="2300.00"/>
	Candidate Name BILL NELSON	Category/Type <input type="text"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BOYD FOR CONGRESS	Transaction ID: SB23.4135 Date of Disbursement
	Mailing Address P.O. Box 15703 P.O. Box 15703	<input type="text" value="11"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Tallahassee State FL Zip Code 32317	Amount of Each Disbursement this Period
	Purpose of Disbursement <input type="text"/>	<input type="text" value="1000.00"/>
	Candidate Name F. A JR. BOYD	Category/Type <input type="text"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CHAMBLISS FOR SENATE	Transaction ID: SB23.4140 Date of Disbursement
	Mailing Address POST OFFICE BOX 12469	<input type="text" value="11"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City ATLANTA State GA Zip Code 30355	Amount of Each Disbursement this Period
	Purpose of Disbursement <input type="text"/>	<input type="text" value="2300.00"/>
	Candidate Name C SAXBY CHAMBLISS	Category/Type <input type="text"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5600.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CNL FINANCIAL GROUP INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) COLEMAN FOR SENATE 08	Transaction ID: SB23.4143 Date of Disbursement
	Mailing Address 680 TRANSFER ROAD SUITE A	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City ST PAUL State MN Zip Code 55114	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name NORM COLEMAN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF BILL POSEY	Transaction ID: SB23.4146 Date of Disbursement
	Mailing Address 1824 SOUTH FISKE BOULEVARD	<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City ROCKLEDGE State FL Zip Code 32955	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name BILL POSEY	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 15	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.4149 Date of Disbursement
	Mailing Address 228 S WASHINGTON ST STE 115	<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2300.00"/>
	Candidate Name JOHN S. MCCAIN	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4300.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CNL FINANCIAL GROUP INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) PUTNAM FOR CONGRESS	Transaction ID: SB23.4156 Date of Disbursement 10 / 31 / 2008
	Mailing Address Post Office Box 2257	Amount of Each Disbursement this Period 2300.00
	City Bartow State FL Zip Code 33831	Category/ Type
	Purpose of Disbursement	
Candidate Name ADAM HUGHES PUTNAM	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 12	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) TEAM SUNUNU	Transaction ID: SB23.4157 Date of Disbursement 10 / 29 / 2008
	Mailing Address PO BOX 500	Amount of Each Disbursement this Period 1000.00
	City RYE State NH Zip Code 03870	Category/ Type
	Purpose of Disbursement	
Candidate Name JOHN E SUNUNU	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) TEXANS FOR SENATOR JOHN CORNYN INC	Transaction ID: SB23.4160 Date of Disbursement 10 / 22 / 2008
	Mailing Address 6850 AUSTIN CENTRE BLVD SUITE 180	Amount of Each Disbursement this Period 2300.00
	City AUSTIN State TX Zip Code 78731	Category/ Type
	Purpose of Disbursement	
Candidate Name JOHN CORNYN	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5600.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 10

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CNL FINANCIAL GROUP INC POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
TOM FEENEY FOR CONGRESS

Transaction ID: SB23.4163

Date of Disbursement

Mailing Address P. O. Box 622345

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

City Oviedo State FL Zip Code 32762

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Candidate Name
TOM FEENEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 24

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

16500.00
