FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS 2019

FOR OFFICE USE ONLY:

FLORIDA COMMISSION ON ETHICS

JUL 08 2020

RECEIVED

PROCESSED

Seminole County-Elected Constitutional Officer

********AUTO**ALL FOR AADC 328 T4 P2 22 704

JAY ZEMBOWER, COMMISSIONER DISTRICT 2
3771 EAGLE PRESERVE PT
SANFORD FL 32773-4347

ID CODE

ID NO. 261726

CONF. CODE L

Zembower, Jay

CHECK IF THIS IS A FILING BY A CANDIDATE ☐

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2019 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 June 29, 20 20 was $ _____.

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, whether owned or leased.

The aggregate value of my household goods and personal effects (described above) is $ 455,000.00

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
2490 CR419 Chuluota, FL 32766	400,000.00
3771 Eagle Preserve Point Sanford FL 32771	238,000.00
127 Big Oak Blvd Chuluota, FL 32766	775,000.00
2046 CR 216 Clayton Alabama 32780	695,000.00

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF $1,000 (See instructions on page 4):

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Wells Fargo P.O. Box 14841 Des Moines Iowa	170,186.22
First South Farm Credit 1474 Union Ave Ozark, Alabama	280,529.14
Suntrust 205 Semoran Blvd Fern Park, FL 32730	15,186.93
Suncoast Credit Union P.O. Box 11904 Tampa FL 33680	45,885.23

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Suncoast Credit Union P.O Box 11904 Tampa FL 33680	54,647.53
HOCC Dept 15729 Palatine IL 60055	18,481.10

(Continued on reverse side)

PART D -- INCOME

Identify each separate source and amount of income which exceeded $1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2019 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2019 federal income tax return and all W2's, schedules, and attachments.
[If you check this box and attach a copy of your 2019 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING $1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
Frank Crum 2 Inc.	100 S. Missouri Ave Clearwater, FL	88,042.24
Seminole County BCC	1101 E. 1st Street, Sanford FL	76,873.15

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

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 [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY			
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

PART F - TRAINING

For officers required to complete annual ethics training pursuant to section 112.3142, F.S.

☒ **I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.**

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 OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA
COUNTY OF Seminole

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization, this 3 day of July, 2020 by [illegible] FCA

(Signature of Notary Public--State of Florida)

Deborah Schafer

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

Personally Known ✓ OR Produced Identification ____

Type of Identification Produced ____

Notary Public State of Florida
Deborah A Schafer
My Commission GG [illegible]
Expires 02/02/2024

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

Signature _____ Date _____

Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.

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

FORM 6

Supplement

William Jay Zembower

Assets:

956 East Altamonte Drive, Altamonte Springs, Florida 32701	$1,500,000.00
445 Olmstead Jeffery's Lake Road, Haley Station Ontario	$650,000.00
Vanguard Investments 455 Devon Park Drive Wayne, PA 19087-1815	$762,294.51
Vanguard Brokerage 455 Devon Park Drive Wayne, PA 19087-1815	$201,396.61
Folio Brokerage 8180 Greensboro Dr 8th Floor McClean VA 22102	$843.78
American Funds P.O. Box 1148 Norfolk VA	$26,431.06
Suntrust Bank Acct	$24,447.25
Suntrust Bank Acct	$22,913.05
BB&T Bank Acct	$11,622.15
Central Florida Educators Credit Union	$ 2432.86
Suncoast Credit Union	$1963.15

Income

First South Farm Credit 1434 Union Ave, Ozark Alabama	$2683.71