2025 Form 1 - Statement of Financial Interests

Filed with COE: 05/22/2026

General Information

Name: MARY C STEWART

PID 200824

AGENCY INFORMATION

Organization	Suborganization	Title
Department Of Environmental Protection	Employees	OPS SENIOR ATTORNEY

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2025.

Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over $2,500) (Major sources of income to the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Name of Source of Income	Source's Address	Description of the Source's Principal Business Activity
Bilzin Sumber Baena Price & Axelrod PA	1450 Brickell Avenue, 23rd Floor, Miami, Florida 33131-3456	Law Firm
Florida Department of Environmental Protectionn	3900 Commonwealth Blvd, Tallahassee, Florida 32399-3000	State agency governing environmental matters

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Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write “none” or “n/a”)

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Location/Description
N/A

Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over $10,000)
(If you have nothing to report, write “none” or “n/a”)

Type of Intangible	Business Entity to Which the Property Relates
Bank Accounts	Elevations Credit Union
Investment Accounts	Franklin Templeton
Florida 401(A) FICA Alternative Plan	Corebridge
Mutual Funds Accounts	T. Rowe Price

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Liabilities

LIABILITIES (Major debts valued over $10,000):
(If you have nothing to report, write “none” or “n/a”)

Name of Creditor	Address of Creditor
N/A	

Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses)
(If you have nothing to report, write “none” or “n/a”)

Business Entity # 1
N/A

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

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Signature of Filer

MARY C STEWART

Digitally signed: **05/22/2026**

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