2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 05/22/2023

General Information

Name: Hon Nick DiCeglie

Address: 374 12th Ave, Indian Rocks Beach, FL 33785 **PID 232974**

County: Pinellas

AGENCY INFORMATION

Organization	Suborganization	Title
Public Service Commission Nominating Council	Council Members	Member
Senate	Elected Constitutional Officer	State Senator, District 18

Net Worth

My Net Worth as of December 31, 2022 was $ 4,886,974.69.

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Assets

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 effect is $ 55,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

Description of Asset	Value of Asset
Solar Sanitation, Inc. Clearwater, FL 33% ownership	$ 1,700,000.00
107 8th St Realty Corporation Brooklyn, NY 50% ownership	$ 2,750,000.00
374 12th Ave Indian Rocks Beach Residential Home 33785	$ 925,000.00
Wells Fargo Checking Account San Francisco, CA	$ 127,278.20
Florida Prepaid Plan Tallahassee, FL	$ 14,164.02
Florida Prepaid Plan Tallahassee FL	$ 13,047.84
See Attached	

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Liabilities

LIABILITIES IN EXCESS OF $1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Mr. Cooper Mortgages (mortgage)	PO Box 818060 5801 Postal Rd Cleveland, OH 44181	$ 404,052.36
Solar Sanitation, Inc. (Loan)	15123 63rd St N Clearwater, FL 33760	$ 127,874.62
US Bank PO Box 79048 St Louis MO 63179	PO Box 79048 St Louis MO 63179	$ 40,068.87
Mercedes Benz Financial Services	PO Box 685 Roanoke TX 76262	$ 16,611.06
Chrysler Capital	PO Box 660335 Dallas TX 75266	$ 53,908.46

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

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Income

Identify each separate source and amount of income which exceeded $1,000 during the year, including secondary sources of income.

☐ I elect to file a copy of my 2022 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding $1,000	Address of Source of Income	Amount
Solar Sanitation, Inc.	15123 63rd St. N Clearwater, FL 33760	$ 208,000.00
State of Florida	200 East Gaines St. Tallahassee, FL 32399	$ 26,646.12

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

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

Interests in Specified Businesses

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 Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Nick DiCeglie

Digitally signed: **05/22/2023**

Filed with COE: 05/22/2023

FLORIDA PREPAID
COLLEGE SAVINGS PLANS

PO Box 6567 • Tallahassee, FL 32314-6567

Statement of Account
Account Information

December 31, 2022

Beneficiary: Carlo D. Diceglie

[redacted]
0015047
NICOLA G DICEGLIE
374 12TH AVE
INDIAN ROCKS BEACH FL 33785-2803

Please review this statement carefully as it summarizes your plan(s) and any processed changes as of December 31, 2022. You may view account details, make payments, or update your contact information at any time by logging into your account at **www.myfloridaprepaid.com**.

The following does not reflect activity after December 31, 2022.

Financial Summary	4-Yr University Tuition
Plan Number	[redacted]
Purchase Price	$12,196.71
Amount Applied to Plan	$13,047.84
*Amount Applied to Fees	$50.00
Amount Outstanding	$0.00
Most Recent Payment Amount	$111.52
Date of Most Recent Payment	12/20/2019
Plan Status	Paid In Fu
Next Payment Due Date	
Payments Due	$0.00
Late Fees Due	$0.00
NSF Fees Due	$0.00
Other Fees Due	$0.00
Total Amount Due to Bring Current	$0.00
Benefits Summary	
Projected Enrollment Year	2026
Matriculation Year	2026
Expiration Year	2036
Hours Purchased	120
Hours Used	0.00
**Hours Available	120.00
Total Dollars Paid	$0.00

Statement of Account
Contact Information

Plan Number: [redacted]

ACCOUNT OWNER	BENEFICIARY	SURVIVOR
NICOLA G. DICEGLIE 374 12TH AVE INDIAN ROCKS BEACH, FL 33785-2803	CARLO D. DICEGLIE 374 12TH AVE INDIAN ROCKS BEACH, FL 33785-2803	ERICA R. DICEGLIE 374 12TH AVE INDIAN ROCKS BEACH, FL 33785-2803
Primary Number: [redacted] **Secondary Number** [redacted] solarsan@msn.com	**Primary Number:** NOT ON FILE **Secondary Number:** NOT ON FILE E-mail Not On File	**Primary Number:** [redacted] **Secondary Number:** [redacted] ericasings@hotmail.com

Updating your contact information is easy! Contact information changes, including change of address, can be made anytime by logging into your account at **www.myfloridaprepaid.com**.

*__Amount Applied to Fees__ reflected on your plan(s) are a result of either late fees, NSF fees, or application fees paid.

Should you have remaining credit hours you are not going to use, you can either transfer the remaining plan benefits to another eligible Beneficiary, or you can request a refund by completing the appropriate form, which you can find by logging into your account at **www.myfloridaprepaid.com/my-account.

Please note that the current and controlling Florida Prepaid Plan Master Contract is available to you online at **www.myfloridaprepaid.com**.

FLORIDA PREPAID
COLLEGE SAVINGS PLANS

PO Box 6567 • Tallahassee, FL 32314-6567

Statement of Account
Account Information

December 31, 2022

Beneficiary: Livia G. Diceglie

0014327
135101
NICOLA G DICEGLIE
374 12TH AVE
INDIAN ROCKS BEACH FL 33785-2803

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The following does not reflect activity after December 31, 2022.

Financial Summary	**4-Yr University Tuition**
Plan Number	[redacted]
Purchase Price	$11,202.99
Amount Applied to Plan	$14,164.02
*Amount Applied to Fees	$50.00
Amount Outstanding	$0.00
Most Recent Payment Amount	$121.06
Date of Most Recent Payment	12/20/2019
Plan Status	Paid In Fu
Next Payment Due Date	
Payments Due	$0.00
Late Fees Due	$0.00
NSF Fees Due	$0.00
Other Fees Due	$0.00
Total Amount Due to Bring Current	$0.00
Benefits Summary	
Projected Enrollment Year	2023
Matriculation Year	2023
Expiration Year	2033
Hours Purchased	120
Hours Used	0.00
**Hours Available	120.00
Total Dollars Paid	$0.00

Statement of Account

Contact Information

Plan Number: [redacted]

ACCOUNT OWNER	BENEFICIARY	SURVIVOR
NICOLA G. DICEGLIE 374 12TH AVE INDIAN ROCKS BEACH, FL 33785-2803	LIVIA G. DICEGLIE 374 12TH AVE INDIAN ROCKS BEACH, FL 33785-2803	ERICA R. DICEGLIE 374 12TH AVE INDIAN ROCKS BEACH, FL 33785-2803
Primary Number: [redacted] **Secondary Number:** [redacted] solarsan@msn.com	**Primary Number:** NOT ON FILE **Secondary Number:** NOT ON FILE E-mail Not On File	**Primary Number:** [redacted] **Secondary Number:** [redacted] ericasings@hotmail.com

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