Filed with COE: 05/31/2024

General Information						
Name:	Mr John Philip Denninghoff		PID 217621			
AGENCY INFORMATION						
Organizatior	n	Suborganization	Title			
Brevard Cou	inty	Employees	Assistant County Manager			
Central Flori	ida Expressway Authority (CFX)	Right of Way Committee	Assistant County Manager			

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2023 .

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	
Board of County Commissioners	2725 Judge Fran Jamieson Way, Viera, FL	Local Government	
Eastern Florida State College	1519 Clearlake Road, Cocoa, FL	Post Secondary Education	

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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			
Checking and Savings Account	Community Credit Union			
Checking Account, Mutual Funds, and Bonds	Morgan Stanley			
Mutual Funds	Nationwide			
Mutual Funds	Nationwide			

2023 Form 1 - Statement of Financial Interests

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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

John Philip Denninghoff

Digitally signed: 05/31/2024

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