# 2024 Form 1 - Statement of Financial Interests

**Filed with COE: 04/21/2025**

## General Information

Name: Mrs Inocensia Hernandez

**PID 270646**

### AGENCY INFORMATION

| Organization | Suborganization | Title |
|---|---|---|
| Fellsmere | City Council | Mayor Pro Tem |
| Fellsmere | Community Redevelopment Agency | FCRA Member |

## Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2024.

## 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 |
|---|---|---|
| PRECISE GLOBAL INSURANCE AGENCY | 9 S MULBERRY ST, FELLSMERE FL 32948 | WAGES,SALARY |
| RENTAL INCOME | VARIES LOCATIONS | RENTAL INCOME |
| GZ & HDZ ENTERPRISES INC | 9 S MULBERRY ST, FELLSMERE FL 32948 | WAGES, SALARY |

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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 |
|---|
| 9305 127TH AVE, FELLSMERE, FL 32948 |
| 103 N MULBERRY ST, FELLSMERE FL 32948 |
| 121 N MYRTLE ST, FELLSMERE FL 32948 |
| 8316 103RD CT, VERO BEACH FL 32967 |
| 272 FLEMING ST, SEBASTIAN, FL 32958 |
| 48 S ELM ST, FELLSMERE, FL 32948 |
| 13875 89TH ST, FELLSMERE FL 32948 |
| LINCOLN STREET, FELLSMERE FL 32948 |
| 17 S MULBERRY ST, FELLSMERE, FL 32948 |
| 98 N BAY ST, FELLSMERE FL 32948 |
| 88 N BAY ST, FELLSMERE FL 32948 |

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## 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 |
|---|---|
| MISSIONSQUARE 401K | CITY OF FELLSMERE-RETIREMENT ACCOUNT |
| BANK ACCOUNT | ITHINK FINANCIAL |
| BANK ACCOUNT | TD BANK |
| BANK ACCOUNT | SPACE COAST CREDIT UNION |

## 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 |
|---|---|
| MR COOPER | UNKNOWN |
| NEWREZ SHELLPOINT | UNKNOWN |
| SPACE COAST CREDIT UNION | UNKNOWN |
| PENTAGON | UNKNOWN |
| UNITEDWHOLESALE | UNKOWN |

## 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 |

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## Training

This section applies only to an appointed school superintendent, an elected municipal officer, elected local officer of an independent special district or a commissioner of a community redevelopment agency created under Part III, Chapter 163, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

☑ I certify that I have completed the required training under Section 112.3142, F.S.

☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

## Signature of Filer

***Inocensia Hernandez***

Digitally signed: **04/21/2025**

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