

2025 Form 6F - Final Full and Public Disclosure of Financial Interests

Filed with COE: 05/18/2025

General Information

Name: Ms Stacy L Miller PE

PID 95570

THE LAST DAY OF MY PUBLIC OFFICE OR POSITION WAS: 04/03/2025

AGENCY INFORMATION

Organization	Suborganization	Title
Department Of Transportation	Employees	District Secretary
Greater Miami Expressway Agency	Authority Members	Secretary District 6
S Florida Regional Transportation Authority	Board Of Directors	Board Member

Net Worth

My Net Worth as of April 3, 2025 was \$ 2,455,444.84.

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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 \$ 47,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
620 Lowell Lane (primary residence)	\$ 677,000.00
2006 Porsche 911S	\$ 22,178.00
2025 Audi Q5	\$ 48,700.00
State of Florida Deferred Compensation Plan (various funds)	\$ 1,317,562.40
Wells Fargo Savings/Checking	\$ 123,098.06
First Horizon Savings	\$ 103,284.16
Putnam Investments Mutual Funds	\$ 226,619.89
Putnam Investments Roth IRA	\$ 42,971.50
Ameritas Annuity	\$ 94,537.19
Ameritas Universal Life Surrender Value	\$ 87,609.25
Diamond Engagement Ring	\$ 10,000.00
Diamond Anniversary Band	\$ 3,000.00
Andrea Robbins/Max Becher Print	\$ 2,575.00
Roe Ethridge Print	\$ 1,550.00
Crystal Service for 12	\$ 7,500.00
China Service for 8	\$ 2,200.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Standard Mortgage	701 Poydras Street Box 45 New Orleans LA 70139	\$ 361,940.61

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income

Please complete the following statement identifying each separate source and amount of income which exceeded \$1,000 received during the period from January 1, 2025, through the last date you held the office or position, including secondary sources of income.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Florida Department of Transportation	1000 NW 111th Ave, Miami FL 33172	\$ 154,266.53

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

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

Interests in Specified Businesses

Business Entity # 1

N/A

Signature of Reporting Official or Candidate

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

Stacy L Miller PE

Digitally signed: 05/18/2025

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