

2024 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/25/2025

General Information

Name: Mr Michael Travis Atkinson

PID 252381

AGENCY INFORMATION

Organization	Suborganization	Title
Hendry County	Elected Constitutional Officer	County Commissioner, District 5

Net Worth

My Net Worth as of December 31, 2024 was \$ 323,178.04.

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 \$ 58,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
1st Bank account	\$ 75,306.55
Suncoast	\$ 21,418.59
everglades credit	\$ 6,144.75
Camper	\$ 67,324.00
boat	\$ 130,000.00
empty lot	\$ 29,425.00
house	\$ 28,663.00
Jeep	\$ 58,976.38
suncoast card	\$ 17,500.00
wyndham card	\$ 20,600.00
Wyndham card 2	\$ 31,000.00
chase	\$ 16,100.00
capital one bass pro	\$ 14,000.00
Charles schwab	\$ 4,035.92

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Everglades credit	1099 w Ventura ave. Clewiston fl 33440	\$ 170,348.77
suncoast credit	231 E Hickpochee ave. Labeled fl 33935	\$ 58,976.38
wyndham card	po box 8801 Wilmington de 19899	\$ 2,667.99
Wyndham card 2	P.O. Box 8801 Wilmington de 19899	\$ 7,005.17
chase	P.O. Box 15299 Wilmington de 19850	\$ 2,719.61
capital one bass pro	po box 71083 charlotte NC 28272	\$ 13,598.23

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2024 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2024 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
Davids carpentry and concrete inc	1711 john rd clewiston fl 33440	\$ 67,600.00
hendry county	640 s Main Street. Labelle 33935	\$ 5,680.00

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

Training

This section applies only to a Constitutional or elected municipal officer, 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 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.

Michael Travis Atkinson

Digitally signed: 06/25/2025

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