

2024 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/21/2025

General Information

Name: Hon Sherra Winesett

CONFIDENTIAL

PID 408

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Senior Judges	Consent to be Assigned	Senior / Retired Judge

Net Worth

My Net Worth as of December 31, 2024 was \$ 6,731,700.00.

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 \$ 30,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

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Description of Asset	Value of Asset
Personal Residence	\$ 350,000.00
Building at 1st & Hendry St	\$ 2,000,000.00
10 acres vacant, Lee Co. FL	\$ 400,000.00
5+ A, vacant, Charlotte Co. FL	\$ 175,000.00
Time Shares	\$ 26,500.00
Bank Account, Bank of America	\$ 33,300.00
CD's, Third Federal	\$ 577,200.00
Bank Accts, Wells Fargo	\$ 47,000.00
Bank Accts, Regions	\$ 367,000.00
CD's, Suncoast Credit Union	\$ 680,000.00
Bank Accts, CD's, Capital One	\$ 317,500.00
CD, Ally Bank	\$ 550,000.00
Bank Acct, CD, First Horizon	\$ 11,500.00
Deferred Comp Fixed Acct	\$ 300,300.00
Deferred Retirement Acct Stable Fund	\$ 255,700.00
IRA CD, Suncoast Credit Union	\$ 262,200.00
Univ Life Ins Policy, Metlife csv	\$ 38,300.00
Met Life Trust Interests	\$ 19,600.00
Receivable {REDACTED}Winesette	\$ 82,000.00
Receivable, Ron James	\$ 150,800.00
Fifth Third Bank	\$ 25,800.00
Receivable, Flex Space USA LLC	\$ 34,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Credit Card(s) Bank of America	PO Box 672050, Dallas Tx	\$ 1,500.00
Credit Card, Citibank	PO Box 6500 Siqox Falls SD 57117	\$ 2,000.00

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
State of Florida, W-2	200 E Gaines St, Tallahassee, Fl	\$ 5,500.00
FRS Pension	PO Box 9000, Tallahassee, Fl	\$ 94,000.00
Social Security	SSA, PO Box 67620, Wilkes-Barre, Pa 18767	\$ 40,800.00
Receivable, {REDACTED} Winesette	{REDACTED}	\$ 2,600.00
Rent on Bld on 1st & Hendry	2248 FIRST ST, Ft Myers, Fl	\$ 24,000.00
IRA Req'd Min Dist	Suncoast Credit Union, PO Box 11904, Tampa Fl 33680	\$ 13,700.00
FRS Req'd Min Dist	PO Box 785027, Orlando Fl	\$ 13,500.00

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Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Voya Req'd Min Dist	PO """"""Box 99067, Hartford, PO Box 99067, Hartford CT 06199	\$ 15,900.00
Ally Bank, interest	PO Box 951, Horsham, Pa 19044	\$ 26,800.00
Third Federal S&L, interest	7007 Broadway Ave, Cleveland Oh 44105	\$ 20,800.00
Capital One, interest	PO BOX 30249, Salt Lake City, Ut 84130	\$ 14,400.00
Suncoast Credit Union, interest	PO Box 11904, Tampa Fl 33680	\$ 20,200.00
Receivable, Ron James	17555 Pine Ridge Rd, FMB, FL 33931	\$ 8,400.00
Receivable, Steve Smith 360, LLC	662 S Tamiami Tri, Osprey FL 34229	\$ 24,600.00
Fifth Third Bank	College Parkway, Fort Myers, Fl	\$ 4,600.00
Regions Bank	North Fort Myers FL	\$ 3,900.00
First Horizon Bank	Fort Myers FL	\$ 7,600.00

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

[illegible]

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.

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.

Sherra Winesett

Digitally signed: 06/21/2025

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