2024 Form 1 - Statement of Financial Interests

Filed with COE: 05/27/2025

General Information

Name: Mr Geoffrey Ryan Jacobs

CONFIDENTIAL

PID 279170

AGENCY INFORMATION

Organization	Suborganization	Title
Pembroke Park	Mayor And Town Commission	Commissioner

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
Silver Airways LLC	2850 Greene St, Hollywood, FL 33020	System Chief Pilot - Airline Captain
Department of Veterans' Affairs	810 Vermont Ave, Washington DC	Veterans Adminstration/D.V.

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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
Hammerhead Blues & Brews Inc. DBA Emelia's Espresso	Beverage/Food Sales	5434 W HLND BCH BLVD, Hollywood, FL 33023	Mobile Coffee Shop

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Location/Description
5 Acre {REDACTED} SAINT CLOUD FL 34771

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
401K/Roth IRA	Fidelity - Silver Airways
1977 Twin-Cessna 402B	AeroCraft Papa Bravo LLC

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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
MidFlorida CU	PO Box 8008, Lakeland, FL, 33802

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

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.

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Signature of Filer

Geoffrey Ryan Jacobs

Digitally signed: **05/27/2025**

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