2024 Form 1 - Statement of Financial Interests

Filed with COE: 06/08/2025

General Information

Name: Hon Abby Shoemaker

PID 271821

AGENCY INFORMATION

Organization	Suborganization	Title
Longwood	Mayor And City 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
Abigail K Shoemaker, EA	877 Woodgate Trail, Longwood, FL 32750	Accounting and Tax Services
Social Security	6401 Security Blvd, Baltimore MD 21235	Survivors Retirement
Florida Retirement Services	P O Box 9000, Tallahassee, FL 32315-9000	Survivors Retirement (Ended September 2nd 2024) None will be reported in 2025

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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
Abigail K Shoemaker, EA	VFW Post 4287	3500 S. Goldenrod Road, Orlando, FL 32822, Orlando, FL	Veterans Group
Abigail K Shoemaker, EA	Western Fashion Accessories, Inc.	215 Hickman Drive, Sanford, FL 32771	Wholesaler

Real Property

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

Location/Description
N/A

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
N/A	

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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
N/A	

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

Abby Shoemaker

Digitally signed: **06/08/2025**

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