

## 2024 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/13/2025

### General Information

Name: Hon Janice A Warren

PID 45677

### AGENCY INFORMATION

| Organization  | Suborganization                | Title         |
|---------------|--------------------------------|---------------|
| Citrus County | Elected Constitutional Officer | Tax Collector |

### Net Worth

My Net Worth as of December 31, 2024 was \$ 4,557,750.00.

### 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 \$ 813,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

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| Description of Asset                               | Value of Asset |
|----------------------------------------------------|----------------|
| Cash/ Checking Account (Truist Bank)               | \$ 43,068.00   |
| Checking Account (Regions Bank)                    | \$ 10,214.00   |
| Money Market Accounts (Truist Bank)                | \$ 46,196.00   |
| Certificate of Deposit (Truist Bank)               | \$ 210,806.00  |
| Checking/ Savings/ CD's - Wells Fargo Bank         | \$ 415,900.00  |
| Suncoast Federal Credit Union - Savings/ CD'S      | \$ 531,173.00  |
| American Express National Bank                     | \$ 137,968.00  |
| Truist Bank 401K Account                           | \$ 211,655.00  |
| Deferred Retirement (Held by FL Retirement System) | \$ 246,070.00  |
| 457 Plan                                           | \$ 220,851.00  |
| Savings Bonds (Face Value)                         | \$ 44,350.00   |
| Certificate of Deposit (Brannen Bank)              | \$ 490,287.00  |
| 1180 N CIRCLE DRIVE, CRYSTAL RIVER, FL 34429       | \$ 366,276.00  |
| 8727 N URAL POINT, DUNNELLON, FL 34433             | \$ 136,653.00  |
| 8980 N PYRENEES POINT, DUNNELLON, FL 34433         | \$ 147,612.00  |
| 8700 N HIMALAYAS POINT, DUNNELLON, FL 34433        | \$ 68,582.00   |
| 4865 S ROEBUCK WAY, HOMOSASSA, FL 34448            | \$ 40,412.00   |
| 4927 S ROEBUCK WAY, HOMOSASSA, FL 34448            | \$ 36,240.00   |
| 11 ELDER COURT E, HOMOSASSA, FL 34446              | \$ 10,249.00   |
| 8493 N OAK RIVER, HERNANDO, FL 34442               | \$ 168,359.00  |
| 360 LAKE RIDGE DRIVE, BLUE RIDGE, GA 30513         | \$ 227,970.00  |
| 1/2 OF LOT 13, LAKE RIDGE DRIVE, BLUE RIDGE, GA    | \$ 5,600.00    |

**Liabilities**

LIABILITIES IN EXCESS OF \$1,000:

| Name of Creditor | Address of Creditor                | Amount of Liability |
|------------------|------------------------------------|---------------------|
| TRUIST BANK      | P.O. BOX 26149, RICHMOND, VA 23260 | \$ 69,499.00        |

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        |
|-----------------------------------------------------------------|---------------------------------------------------------|---------------|
| Citrus County Tax Collector                                     | 210 N. Apopka Avenue, Suite 100, Inverness, FL 34450    | \$ 174,156.00 |
| Truist Bank Pension                                             | 101 N. Cherry Street FL 5, Winston Salem, NC 27101-4013 | \$ 10,005.00  |
| Mid-State Federal Bank Pension/Principal Life Insurance Company | 711 High Street, Des Moines, IA 50392-0001              | \$ 4,070.00   |
| Social Security Administration                                  | P.O. Box 67620, Wilkes-Barre, PA 18767-7620             | \$ 44,679.00  |
| Truist Bank (Interest)                                          | 1 E. Jefferson Street, Brooksville, FL 34601            | \$ 14,899.00  |
| Suncoast Federal Credit Union                                   | 1039 NE 5th Street Crystal River FL 34429               | \$ 20,949.00  |
| Brannen Bank (Interest)                                         | PO Box 1929, Inverness, FL 34451                        | \$ 23,490.00  |
| Wells Fargo Bank (Interest)                                     | 2437 E Gulf To Lake Highway, Inverness, FL 34453        | \$ 14,518.00  |
| American Express National Bank                                  | 115 W Towne Ridge Parkway, Sandy, UT 84130              | \$ 5,592.00   |
| Rental Property                                                 | 8493 N Oak River, Hernando, FL 34442                    | \$ 13,344.00  |

## 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.

***Janice A Warren***

Digitally signed: 06/13/2025

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