2024 Form 1 - Statement of Financial Interests

Filed with COE: 06/14/2025

General Information

Name: Ms Joy Beverley Smith

PID 289418

AGENCY INFORMATION

Organization	Suborganization	Title
West Park, City of	Mayor & City Commission	

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
CITY OF MIRAMAR	2300 CIVIC CENTER PLACE	UTILITIES GOVERNMENT
CITY OF WEST PARK	7320 GRIFFIN RD #102 DAVIE FL 33314	CITY GOVERNMENT

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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
N/A			

Real Property

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

Location/Description
4712 SW 25TH ST WEST PARK FL 33023
LAKE LUCY MANOR MB4 BLK 7 PG79 LOT 19-20 PUTNAM COUNTY FL

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
BANK ACCOUNT	SPACECOAST CREDIT UNION

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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
FEDERAL LOAN SERVICING US DEPARTMENT OF EDUCATION	PO BOX 790234 ST LOUIS MO 63179
NEWREZ MORTGAGE	601 OFFICE CENTER DR. #100 FORT WASHINGTON PA 19034

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

Joy Beverley Smith

Digitally signed: **06/14/2025**

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