2024 Form 1 - Statement of Financial Interests

Filed with COE: 06/23/2025

General Information

Name: Mr Jonathan Maples

PID 273608

AGENCY INFORMATION

Organization	Suborganization	Title
Lake Clarke Shores	Mayor And Town Council	Council Member

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
Insurance	3300 PGA Blvd Ste 400 Palm Beach Gardens, FL 33	Insurance
Wealth Management	3300 PGA Blvd Ste 400 Palm Beach Gardens, FL 33	Investment
Financial Planning	3300 PGA Blvd Ste 400 Palm Beach Gardens, FL 33	Financial Planning
Rental Property	5375 Water Valley Dr Tallahassee, FL 32303	Rental Income

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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
5375 WATER VALLEY DR TALLAHASSEE FL 32303-7928

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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
NSA	E trade
JNJ	E Trade
V	E Trade
VGHCX	Etrade
WELL	Etrade
VGT	Charles Schwab
Cash	PNC
Cash	Navy Federal
Real Estate Holdings	Madison Trust Company
DODGX	Vanguard
NVDA	Etrade
GRMAX	Charles Schwab
VDE	Charles Schwab

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	

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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.

Signature of Filer

Jonathan Maples

Digitally signed: **06/23/2025**

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