2024 Form 1 - Statement of Financial Interests

Filed with COE: 06/25/2025

General Information

Name: Mr Keith V Sabiel Sr

PID 34053

AGENCY INFORMATION

Organization	Suborganization	Title
Pinellas Park	Mayor And City Council	Councilmember

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 PINELLAS PARK	5141 78TH AVENUE	RETIREMENT PENSION
CITY OF PINELLAS PARK	5141 78TH AVENUE	BI-WEEKLY PAY
SOCIAL SECURITY ADMIN	WASHINGTON DC	SOCIAL SECURITY RETIREMENT

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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
9478 60TH LANE PINELLAS PARK FL 33782
6901 83RD AVENUE PINELLAS PARK FL 33782
5316 TROPICAL POINT WEEKI WACHEE FL 34607
6849 RICHARD DRIVE WEEKI WACHEE FL 34607

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
457 RETIREMENT PLAN	MISSION SQUARE

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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

Keith V Sabiel Sr

Digitally signed: **06/25/2025**

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