

**General Information**

Name: Mrs Martina Rose Williams

PID 317255

**AGENCY INFORMATION**

| Organization | Suborganization | Title |
|--------------|-----------------|-------|
|              |                 |       |

**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 |
|------------------------------------|------------------|---------------------------------------------------------|
| This section not amended by filer. |                  |                                                         |

**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 |
|------------------------------------|-------------------------------------------|-------------------|---------------------------------------|
| This section not amended by filer. |                                           |                   |                                       |

**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**

Bank Accounts

BECU (Trust accounts, daily checking)

**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.

## Amendment Reason

Explanation of changes why are you amending your previous form 1 submission?

**Missed adding intangible property.**

## Signature of Filer

***Martina Rose Williams***

Digitally signed: 06/27/2025

Filed with COE: 06/27/2025