2024 Form 1 - Statement of Financial Interests

Filed with COE: 06/30/2025

General Information

Name: Mr Nigel Patrick Fullick

PID 300059

AGENCY INFORMATION

Organization	Suborganization	Title
Bonita Springs	Council	Councilmember
Lee County	Tourist Development Council	Councilman

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
Newrez, LLC	1100 Virginia Dr. Ste. 125	Mortgage Banking
City of Bonita Springs	9101 Bonita Beach Rd., Bonita Springs, FL 34135	City Council
Social Security Administration	2659 Professional Cir., Naples, FL 34119	Retirement
Charles Schwab Investment Account	375 Fifth Ave S. Ste 101, Naples, FL 34102	Financial Investments
Ameriprise Financial	2458 NW 67'th St., Boca Raton, Florida 33496	Annuity and Investments

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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
27233 JC LN, Bonita Springs, FL 34135

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
Charles Schwab 401 K Account	N/A
Amerprise Financial 401 K	N/A
Florida Retirement System	N/A

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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
Newrez LLC Mortgage	1100 Virginia Dr., Ft. Washington, PA 19034
Newrez LLC Mortgage	1100 Virginia Dr., Ft. 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

Nigel Patrick Fullick

Digitally signed: **06/30/2025**

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