2024 Form 1 - Statement of Financial Interests

Filed with COE: 08/31/2025

General Information

Name: Mr Stephen Shylkofski

PID 311523

AGENCY INFORMATION

Organization	Suborganization	Title
Groveland	Planning and Zoning Board	Planning and Zoning Board 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
Find Feed & Restore	830 W Montrose Street, Clermont FL 34711	Vice President
S&S Strategies	3041 Sunscape Ter, Groveland FL 34736	Partner
Webster for Congress	P.O. Box 1007, Webster, FL 33597	Campaign Advisor

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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
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
Traditional IRA	Edward Jones
Roth IRA	Edward Jones
Savings	Edward Jones
Checking	PNC Bank

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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
Freedom Mortgage	951 Yamato Road, Boca Raton, FL 33431
Addition Financial Credit Union - Car Loan	1000 Primera Bivd. Lake Mary, FL 32746

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

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

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Signature of Filer

Stephen Shylkofski

Digitally signed: **08/31/2025**

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