2024 Form 1 - Statement of Financial Interests

Filed with COE: 09/01/2025

General Information

Name: Mr Douglas A Lawson

PID 283409

AGENCY INFORMATION

Organization	Suborganization	Title
Riviera Beach	Mayor And City Council	COUNCILPERSON

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
INFINITY TAXES AND BEYOND	25 EAST BLUE HERON BLVD RIVIERA BEACH FL 33404	TAX PREP
SUPERSTAR REALTY	801 NORTHPOINT PKWY	REAL ESTATE
LAWSON REAL ESTATE	25 EAST BLUE HERON BLVD	REAL ESTATE

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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
ARETE	REAL ESTATE INVESTMENT	25 EAST BLUE HERON BLVD RIVIERA BEACH	25 EAST BLUE HERON BLVD RIVIERA BEACH FL

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Location/Description
3430 HARROW LANE OVIEDO FL 32765
3616 AVENUE K RIVIERA BEACH FL 33404
1329 WEST 23RD STREET RIVIERA BEACH FL 33404
LOT 1 BLOCK 18 UNIT 2 SECTION11, TOWNSHIP 44 SOUTH, RANGE 26 EAST, LEHIGH ACRES
PARCEL CONTROL 56-43-42-29-09-006-0290

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
IRA	NORTHWESTERN MUTUAL
STOCKS AND BONDS	STASH

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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
PHH MORTGAGE SERVICES	PO BOX 5452, MT LAUREL NJ 08054
FREEDOM MORTGAGE	PO BOX 50428 INDIANAPOLIS IN 46250

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

Douglas A Lawson

Digitally signed: **09/01/2025**

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