2024 Form 1 - Statement of Financial Interests

Filed with COE: 12/23/2025

General Information

Name: Mr DOUG HARR

PID 319613

AGENCY INFORMATION

Organization	Suborganization	Title
Redington Shores	Mayor And Town Commissioners	Commissioner, District 1

CANDIDATE FOR

Position	Agency Name	Position sought or held
City, Town or Village (Commission or Council), Governing Board - Form 1 (Effective 6/10/2024)	Town of Redington Shores	Commissioner District 1

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**
FRP	8200113th St N Suite 200 Seminole FL 33772	Insurance Agent
Town of Redington Shores	17425 Gulf Blvd Redington Shores FL 33708	Commissioner District 1
Raymond james Financial Services	2713 1st Ave N St Petersburg FL 33713	Investment income

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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
971 Lampp Drive Englewood FL 34223 Raw Land

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
Regions Bank	DKMM Holdings, Inc
Regions Bank	Personal Accounts
Business Ownership	DkMM Holdings, Inc
Wells Fargo	Allianz

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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
Florida Central Credit Union	8202 113th St Seminole FL 33772
Mercedes Benz Financial Services	PO Box 5209 Carol Stream IL 60197
Capital One Auto Finance	7933 Preston Rd Bldg 5 Plano TX 75024
Lake Michigan Credit Union	PO Box 2088 Grand Rapids MI 49501
Fifth Third Bank	PO Box 630778 Cincinnati OH 45263

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 HARR

Digitally signed: **12/23/2025**

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