2025 Form 1 - Statement of Financial Interests

Filed with COE: 03/26/2026

General Information

Name: Mr Christopher Carl Nabicht

PID 82363

AGENCY INFORMATION

Organization	Suborganization	Title
Deltona	City Commission	City Commissioner
Deltona	Southwest Deltona Community Redevelopment Agency (CRA)	CRA member

CANDIDATE FOR

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

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2025.

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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
City of Deltona Firefighters Pension	668 N River RD Naperville IL 60563	Retirement
Nation Wide Retirement Solutions	PO Box 1827797 Columbus OH 43218-2797	Retirement deferred comp.
Social Security	PO Box 67610 Wilkes-Barre PA 18767-7610	Retirement
City of Deltona	2345 Providence Blvd Deltona Fl. 32725	City Commission payroll

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

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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
N/A	

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
FAIRWINDS	111 HOWLAND BLVD DELTONA, FL 32738
ROCKET MORTGAGE	PO BOX 6577 CAROL STREAM, IL 60197-6577
FEMA (SBA)	801 R ST., SUITE 101 FRESNO, CA 93721

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

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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.

Signature of Filer

Christopher Nabicht

Digitally signed: **03/26/2026**

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