

2025 Form 6X - Amendment to Full and Public Disclosure of Financial Interests

Filed with COE: 04/24/2026

General Information

Name: Hon Oliver G Gilbert III

PID 52522

AGENCY INFORMATION

Organization	Suborganization	Title
Miami-Dade County	Elected Constitutional Officers	TPO Vice Chairman
Miami-Dade County	Miami International Airport	TPO Vice Chairman
Miami-Dade Transportation Planning Organization (TPO)	Governing Board	TPO Vice Chairman
South Florida Regional Planning Council	Board of Supervisors	Council Member

Net Worth

My Net Worth as of December 31, 2025 was \$ 880,315.03.

Assets

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use.

The aggregate value of my household goods and personal effect is \$ 10,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Insurance Investment Policy	\$ 226,651.35

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
This section not amended by filer.		

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
This section not amended by filer.		

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2025 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2025 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
This section not amended by filer.		

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
This section not amended by filer.			

Interests in Specified Businesses**Business Entity # 1**

This section not amended by filer.

Training

This section applies only to a Constitutional or elected municipal officer, 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.

Amendment Reason

Explanation of changes why are you amending your previous form 6 submission?

My Financial Advisor provided me with the incomplete numbers for my Insurance and Investments Policy.

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6X and that the facts stated in it are true.

Oliver G Gilbert III

Digitally signed: **04/24/2026**

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