2025 Form 1 - Statement of Financial Interests

Filed with COE: 05/19/2026

General Information

Name: Carol R Whitmore

PID 10143

AGENCY INFORMATION

Organization	Suborganization	Title
Holmes Beach	Mayor And City Commission	City Commissioner

CANDIDATE FOR

Position	Agency Name	Position sought or held
City, Town or Village (Commission or Council), Governing Board - Form 1 (Effective 6/10/2024)	CITY COMMISSION, HOLMES BEACH FLORIDA	CITY COMMISSIONER

Disclosure Period

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

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
SOCIAL SECURITY	PO BOX 1214 CHARLOTTE NC 28201	RETIREMENT
FLORIDA RETIREMENT	PO BOX 9000 TALLAHASSEE	RETIREMENT
UNIVERSAL HEALTH	PO BOX 569 PITTSBURGH PA 15230	RETIREMENT
CITY OF HOLMES BEACH	5801 MARINA DR. HOLMES BEACH 34217	CITY COMMISIONER

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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
IRA	LPL FINANCIAL

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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
LAURENT RENARD	20 SPRING HALLOW RD FAR HILLS NJ 07931
CAPITAL ONE CREDIT CARD	1680 CAPITAL ONE DRIVE MCLEAN VA 22102
SUNCOAST CREDIT UNION	6367 MANATEE AVE W BRADENTON FL 34209

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

Carol R Whitmore

Digitally signed: **05/19/2026**

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