Filed with COE: 05/20/2026

General Information

Name: Mr Roger F Eckert

PID 288789

AGENCY INFORMATION

Organization	Suborganization	Title
Lake Helen	Mayor And City Commission	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
Deltona Firefighters Pension Plan	2345 Providence Blvd, Deltona, FL 32725	Fire and EMS Services
Social Security Administration	600 W. Madison St, Chicago, IL 60661	Social Security Services
Florida Division of Retirement	PO Box 9000, Tallahassee, FL 32315	Retirement Services
City of Lake Helen	PO Box 39, Lake Helen, FL 32744	Government/Public Services
Ally Bank	PO Box 2554, Cranberry TWP, PA 16066	Bank Services, CD's

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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
254 VERMONT ST, LAKE HELEN, FL 32744
132 E KICKLIGHTER RD, LAKE HELEN, FL 32744

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
457 (B) Retirement Plan	Nationwide Retirement Solutions
Bank Accounts	Space Coast Credit Union
Bank Accounts	Wells Fargo Bank
Bank Accounts	Mainstreet Community Bank of Florida
Stocks	The Proctor and Gamble Company
Stocks	Prudential Financial, Inc
Bank Accounts/CD's	Ally.com

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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
SYNCHRONY BANK	PO BOX 71791, PHILADELPHIA, PA 19176-1791

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

Roger F Eckert

Digitally signed: **05/20/2026**

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