2025 Form 1 - Statement of Financial Interests

Filed with COE: 06/23/2026

General Information

Name: Mrs Phyllis Ann Choy

PID 273805

AGENCY INFORMATION

Organization	Suborganization	Title
Jupiter	Mayor And Town Council	Councilor
Palm Beach County Housing Authority	Board of Commissioners	Board Vice Chair

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
Water Pointe Realty Group	393 Tequesta Drive, Tequesta, FL 33469	Realtor, Commissions Earned
Water Pointe Realty Group	107 Waterbridge Lane	Real estate sales
See Attached		

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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
N/A	

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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
N/A	

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.

Filed with COE: 06/23/2026

Signature of Filer

Phyllis Ann Choy

Digitally signed: **06/23/2026**

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☐ VOID ☐ CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		OMB No. 1545-0116 Form **1099-NEC** (Rev. April 2025) For calendar year 2025	**Nonemployee Compensation**
Water Pointe Realty Group of Jupiter, In 393 Tequesta Drive Tequesta, FL 33469 561-747-3377			
PAYER'S TIN 48-1288299	RECIPIENT'S TIN [redacted]	1 Nonemployee compensation $ 124225.34	**Copy C For Payer** For Privacy Act and paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns.
RECIPIENT'S name Phyllis Choy		2 Payer made direct sales totaling $5,000 or more of consumer products to recipient for resale ☐	
Street address (including apt. no.) 107 Waterbridge Lane		3 Excess golden parachute payments $	
City or town, state or province, country, and ZIP or foreign postal code Jupiter, FL 33458		4 Federal income tax withheld $	
Account number (see instructions) [redacted]	2nd TIN not. ☐	5 State tax withheld $ $	6 State/Payer's state no. FL
			7 State income $ $

Form **1099-NEC** (Rev. 4-2025) www.irs.gov/Form1099NEC Department of the Treasury - Internal Revenue Service

DAA