

2025 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/17/2026

General Information

Name: Joel G Flores

PID 271008

AGENCY INFORMATION

Organization	Suborganization	Title
Children's Services Council/Palm Beach County	Council Members	
Palm Beach County	Elected Constitutional Officer	County Commissioner, District 3
Palm Beach County Solid Waste Authority	Governing Board	County Commissioner, District 3
Treasure Coast Reg. Planning Council	Board of Supervisors	Commissioner

Net Worth

My Net Worth as of June 1, 2026 was \$ 345,091.52.

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 \$ 345,091.52.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Carr 493 km 2.4 Bo Corcovado, Hatillo, PR 00659	\$ 195,000.00
Vehicle	\$ 17,000.00
Vehicle	\$ 12,000.00
Greenacres 401 (a) Plan	\$ 11,500.00
Greenacres 401 (b) Plan	\$ 27,000.00
529 Plan	\$ 3,200.00
529 Plan	\$ 13,800.00
USAA Checking Account	\$ 2,100.00
Chase Checking Account	\$ 23,000.00
Nationwide 457 Plan	\$ 3,500.00
FRS Investment	\$ 36,991.52

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Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Cooperativa de Hatillo	P.O. Box 95, Hatillo PR 00659	\$ 192,000.00
Pen Fed Credit Union	P.O. Box 1432, Alexandria VA 22313	\$ 13,969.65
U.S. Department of Education	P.O. Box 2837 Portland, OR 97208	\$ 26,000.00
PennyMac Mortgage	9009 Corporate Lake Dr Suite 100 Suite 320, Tampa, FL 33634	\$ 600,000.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

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
Hacienda Las Flores LLC	P.O. Box 9787 Hatillo PR 00613	\$ 10,000.00
VA Pension	P.O. Box 5365 Janesville, WI 53547-5365.	\$ 30,000.00
Palm Beach County Commissioner, District 3	301 N. Olive Avenue West Palm Beach, FL 33401	\$ 113,608.00
Anchor Bank	6805 Lake Worth Road Greenacres, Florida 33467	\$ 50,120.00

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
N/A			

Interests in Specified Businesses

Business Entity # 1	
Name of Business Entity	Hacienda Las Flores LLC
Address of Business Entity	PO Box 9787 Arecibo PR 00613
Principal Business Activity	Nursing Home
Postion Held with Entity	Owner
I own more than a 5% Interest in the Business	Yes
Nature of my Ownership Interest	Owner

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.

Signature of Reporting Official or Candidate

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

Joel G Flores

Digitally signed: 06/17/2026

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