2025 Form 1 - Statement of Financial Interests

Filed with COE: 06/07/2026

General Information

Name: Mrs Lisa L Bennett

PID 270549

AGENCY INFORMATION

Organization	Suborganization	Title
Winter Garden	Community Redevelopment Agency Board	Commissioner District 1/CRA Member
Winter Garden	Mayor And City Commission	Commissioner District 1/CRA Member

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
Diaz, Tenant	600 Center St Ocoee Fl	Rental
Live Oak Bank	1757 Tiburon Dr Wilmington NC 28403	Banking
Lisa Bennett LLC	422 N. Woodland Street Winter Garden Fl	Real Estate Sales
Shadrix, Tenant	600 Center St Ocoee Fl	Rental
Demps, Tenant	1405 Snowden St Ocoee Fl	Rental
Eduardo Garcia	1405 Snowden St Ocoee Fl	Property Sale

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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
Windsor Realty Group, Inc.	Real Estate Sales	PO Box 770332 Winter Garden, Fl. 34777	Real Estate Sales

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Location/Description
1405 Snowden Street Ocoee, Fl. 34761/ Rental
600 Center St. Ocoee, Fl. 34761/ Rental
43 Squirrel Rd. Defuniak Springs, Fl. 32433

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
Bank Accounts (Seacoast National Bank)	Lisa Bennett LLC, Greg and Lisa Bennett
Bank Account (Live Oak Bank)	Greg and Lisa Bennett

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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
United Wholesale Mortgage	PO Box 77404 Ewing, NJ 08628

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

Lisa L Bennett

Digitally signed: **06/07/2026**

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