2025 Form 1 - Statement of Financial Interests

Filed with COE: 06/18/2026

General Information

Name: Dr Tim Daniel Horvath

PID 312025

AGENCY INFORMATION

Organization	Suborganization	Title
Neptune Beach	Mayor And City Council	Councilor, Seat 2

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
Real Estate Investments	103 Century21 DR	Personal Commercial Real Estate
PM Company	103 Century 21 Dr	Real Estate PM Company
Anesthesia	Baptist Beaches	Anesthesia Provider
Residential Rehabs	103 Century 21 Dr	PURCHASING HOUSES AND REHABBING THEM TO RESELL

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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
BOLD CITY COMMERCIAL	RENTAL INCOME	103 CENTURY 21 DR	COMMERCIAL LEASING
BOLD CITY PROPERTY MANAGEMENT	MANAGING REAL ESTATE	103 CENTURY 21 DR	PROPERTY MANAGEMENT AND BROKERAGE

Real Property

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

Location/Description
101 CENTURY 21 DR
103 CENTURY 21 DR
1734 KINGSLYE AVE
5610 FT. CAROLINE
3210 ROOSEVELT

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	PERSONAL ACCOUNTS
RETIREMENT ACCOUNTS	PERSONAL ACCOUNTS
CARS	PERSONAL VEHICLES
STOCKS	PERSONAL STOCKS
CASH	PERSONAL

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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.

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Signature of Filer

Tim Daniel Horvath

Digitally signed: **06/18/2026**

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