2025 Form 1 - Statement of Financial Interests

Filed with COE: 06/19/2026

General Information

Name: Michael DiBrizzi

PID 238200

AGENCY INFORMATION

Organization	Suborganization	Title
Largo	Mayor And City Commission	City 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
Camelot Community Care	15500 Roosevelt Boulevard Suite 204 Clearwater, Fl. 33760	Non-Profit Social Services
American Century Equity Income Fund	4500 Main Street Kansas City Missouri 64111	Mutual Fund Dividend
Hartford Dividend & Growth Fund	1 hartford Plaza Hartford Ct 06155	Mutual Fund Dividend
Main Street Capital Corp	1300 Post oak BLVD Houston Texas 77056	Stock Dividend
Vanguard 500 Index Fund	100 Vanguard BLVD Malvern PA 19355	Mutual Fund Dividend
Allspring Growth Fund	1415 Vantage park Drive Charlotte NC 28203	Mutual Fund Dividend

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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
7571 121 Terrace Largo Fl. 33773

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
Cash in Bank Account	Wells Fargo
Investment Account	Wells Fargo
Joint Investment Account with Spouse	Merrill Lynch
401K Retirement Account	Empower
United States Savings Bonds	US Treasury

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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
Wells Fargo bank Mortgage	PO Box 14547 Des Moines IA 50306
SE Toyota Finance	250 Jim Moran BLVD Deerfield beach 33442
Truist Bank Mortgage	PO Box 79041 Baltimore MD 21279

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

Michael DiBrizzi

Digitally signed: **06/19/2026**

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