

General Information

Name: Mrs Melisa Watts Giovannelli

PID 265757

AGENCY INFORMATION

Organization	Suborganization	Title
Lee County	Affordable Housing Advisory Committee	Committee Member
Lee County Public Schools	Elected Constitutional Officer	School Board Member District 2

Net WorthMy Net Worth as of June 27, 2026 was \$ 1,299,885.61.

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 \$ 115,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
1848 OCTAVIA STREET LEHIGH ACRES FL	\$ 25,000.00
1917 DIXIE WAY LEHIGH ACRES FL	\$ 25,000.00
1900 DIXIE WAY LEHIGH ACRES FL	\$ 25,000.00
410 WILLIAMS AVE LEHIGH ACRES FL	\$ 25,000.00
511 WILSON DRIE INTERLACHEN FL 32148	\$ 20,000.00
LINCOLN NAUTLIS 2024	\$ 55,000.00
RAYMOND JAMES INVESTMENT	\$ 269,723.46
HORIZON 1	\$ 1,300.70
REGIONS BANK ACCOUNT 1	\$ 11,591.07
REGIONS BANK ACCOUNT 2	\$ 2,953.54
REGIONS BANK ACCOUNT 3	\$ 1,000.04
257 EVERGREEN LANE MINERAL BLUFF GA 30559	\$ 500,000.00
FRS PENSION PLAN	\$ 50,501.22
5083 LEXINGTON BLVD FT MYERS FL 33919	\$ 450,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Costco Anywhere Visa	PO Box 790046 St Louis MO 63179	\$ 9,570.19
Truist Loan Services	PO Box 2306 Wilson NC 27894	\$ 55,234.58

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
Cross Country Mortgage	1 Corporate Dr Ste 360 Lake Zurich IL 60047	\$ 212,379.65

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
Lee County School Board	2855 Colonial Blvd Ft Myers FL 33901	\$ 52,063.15
Barclays Real Estate Group	3444 Marinatown Ln Ste N Ft Myers FL 33903	\$ 15,925.68
See Attached		

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**

N/A

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.

Melisa Watts Giovannelli

Digitally signed: 06/29/2026

Filed with COE: 06/29/2026

LEADERSHIP ADVOCACY SERVICE

FADSS

FLORIDA ASSOCIATION OF DISTRICT SCHOOL SUPERINTENDENTS



Certificate of Completion

THIS IS TO CERTIFY THAT

Melisa W Giovannelli

has completed the 2025 four (4) hours of required ethics training pursuant to Section 112.3142, Florida Statutes, on 12/16/25, which was provided electronically from the Florida Association of District School Superintendents.*

A handwritten signature in black ink, appearing to read "B. Moore".

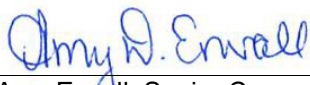
Brian Moore, General Counsel
Florida Association of District School
Superintendents

A handwritten signature in blue ink, appearing to read "Ellen Odom".

Ellen Odom, General Counsel
Escambia County School Board

A handwritten signature in blue ink, appearing to read "David Koperski".

David Koperski, School Board Attorney
Pinellas County School Board

A handwritten signature in blue ink, appearing to read "Amy D. Envall".

Amy Envall, Senior Counsel
Sniffen & Spellman, P.A.

A handwritten signature in blue ink, appearing to read "John C. Palmerini".

John C. Palmerini, General Counsel
Orange County School Board



*This certificate does not have to be filed with the Florida Commission on Ethics, but should be maintained in your records and used to "check the box" on you Form 6 or Form 1 for 2024.

Form **1120-S**Department of the Treasury
Internal Revenue Service**U.S. Income Tax Return for an S Corporation**Do not file this form unless the corporation has filed or
is attaching Form 2553 to elect to be an S corporation.Go to www.irs.gov/Form1120S for instructions and the latest information.

OMB No. 1545-0123

2025

For calendar year 2025 or tax year beginning , ending

A S election effective date 01/01/13		Name MELISA GIOVANNELLI PA		D Employer identification number 
B Business activity code number (see instr.) 531210	Number and street. If a P.O. box, see instructions. 5083 LEXINGTON BLVD		Room or suite no.	E Date incorporated 01/01/2013
C Check if Sch. M-3 attached ☐	City or town FORT MYERS	State or province FL	Country	F Total assets (see instructions) \$ 7,546
		ZIP or foreign postal code 33919		

- G** Is the corporation electing to be an S corporation beginning with this tax year? See instructions. ☐ Yes ☒ No
- H** Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination
- I** Enter the number of shareholders who were shareholders during any part of the tax year **1**
- J** Check if corporation: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 22. See the instructions for more information.

Income	1a Gross receipts or sales 47,971	b Less returns and allowances	c Balance	1c	47,971
	2 Cost of goods sold (attach Form 1125-A)			2	
	3 Gross profit. Subtract line 2 from line 1c			3	47,971
	4 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			4	
	5 Other income (loss) (see instructions—attach statement)			5	
	6 Total income (loss). Add lines 3 through 5			6	47,971
Deductions (see instructions for limitations)	7 Compensation of officers (see instructions—attach Form 1125-E)			7	15,926
	8 Salaries and wages (less employment credits)			8	
	9 Repairs and maintenance			9	
	10 Bad debts			10	
	11 Rents			11	
	12 Taxes and licenses			12	1,599
	13 Interest (see instructions)			13	
	14 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)			14	153
	15 Depletion (do not deduct oil and gas depletion)			15	
	16 Advertising			16	2,406
	17 Pension, profit-sharing, etc., plans			17	
	18 Employee benefit programs			18	
	19 Energy efficient commercial buildings deduction (attach Form 7205)			19	
	20 Other deductions (attach statement) See Stmt 1			20	15,463
	21 Total deductions. Add lines 7 through 20			21	35,547
	22 Ordinary business income (loss). Subtract line 21 from line 6			22	12,424
Tax and Payments	23a Excess net passive income or LIFO recapture tax (see instructions)	23a		23c	
	b Tax from Schedule D (Form 1120-S)	23b			
	c Add lines 23a and 23b (see instructions for additional taxes)				
	24a Current year's estimated tax payments and preceding year's overpayment credited to the current year	24a		24z	
	b Tax deposited with Form 7004	24b			
	c Credit for federal tax paid on fuels (attach Form 4136)	24c			
	d Elective payment election amount from Form 3800	24d			
	z Add lines 24a through 24d				
	25 Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐			25	
	26 Amount owed. If line 24z is smaller than the total of lines 23c and 25, enter amount owed			26	
27 Overpayment. If line 24z is larger than the total of lines 23c and 25, enter amount overpaid			27		
28 Enter amount from line 27: a Credited to 2026 estimated tax b Refunded			28b		
c Routing number		d Type: ☐ Checking ☐ Savings			
e Account number					

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below? See instructions. ☒ Yes ☐ No**PRESIDENT**

Signature of officer MELISA GIOVANNELLI		Date	Title
Preparer's name GARY G. ZINK, CPA		Date 06/11/26	Check ☐ if self-employed
Preparer's signature		PTIN *****	
Firm's name ZINK CPA, P.A.		Firm's EIN 65-0165341	
Firm's address 8191 COLLEGE PKWY STE 204		Phone no. 239-936-1120	
FORT MYERS, FL		33919-5110	

For Paperwork Reduction Act Notice, see separate instructions.

Form **1120-S** (2025)

Schedule B Other Information (see instructions)

1	Check accounting method: a ☒ Cash b ☐ Accrual c ☐ Other (specify) _____	Yes	No
2	See the instructions and enter the: a Business activity REAL ESTATE SALES b Product or service SALES & MANAGEMENT		
3	At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation		X
4	At the end of the tax year, did the corporation: a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		X

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) Is 100%, Enter the Date (if applicable) a Qualified Subchapter S Subsidiary Election Was Made

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below	Yes	No
		X

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital

5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "Yes," complete lines (i) and (ii) below. (i) Total shares of restricted stock _____ (ii) Total shares of non-restricted stock _____	Yes	No
		X
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "Yes," complete lines (i) and (ii) below. (i) Total shares of stock outstanding at the end of the tax year _____ (ii) Total shares of stock outstanding if all instruments were executed _____		X
6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide information on any reportable transaction?		X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount ☐ If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.		
8 If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation, and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions \$ _____		
9 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		X
10 Does the corporation satisfy one or more of the following? See instructions a The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense. b The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$31 million and the corporation has business interest expense. c The corporation is a tax shelter and the corporation has business interest expense. If "Yes," complete and attach Form 8990 , Limitation on Business Interest Expense Under Section 163(j).		X
11 Does the corporation satisfy both of the following conditions? a The corporation's total receipts (see instructions) for the tax year were less than \$250,000. b The corporation's total assets at the end of the tax year were less than \$250,000. If "Yes," the corporation is not required to complete Schedules L and M-1.	X	

Schedule B Other Information (see instructions) (continued)

	Yes	No
12 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		X
If "Yes," enter the amount of principal reduction \$		
13 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a Did the corporation make any payments that would require it to file Form(s) 1099?		X
b If "Yes," did or will the corporation file required Form(s) 1099?		
15 Does the corporation intend to self-certify as a Qualified Opportunity Fund?		X
If "Yes," complete and attach Form 8996. Enter the amount (if any) from Form 8996, line 15 \$		
16 At any time during the tax year, did the corporation: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? See instructions		X
17 Reserved for future use		

Schedule K Shareholders' Pro Rata Share Items

		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1	12,424
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S))	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)	8c	
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) Type:	10	
	11 Section 179 deduction (attach Form 4562)	11	
Credits	12a Cash charitable contributions	12a	
	b Noncash charitable contributions	12b	
	c Investment interest expense	12c	
	d Section 59(e)(2) expenditures Type:	12d	
	e Other deductions (see instructions) Type:	12e	
	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
Inter-national	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c	
	d Other rental real estate credits (see instructions) Type:	13d	
	e Other rental credits (see instructions) Type:	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
	g Other credits (see instructions) Type:	13g	
	14a Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items—International, and check this box to indicate you are reporting items of international tax relevance ☐		
	b Check this box if you qualified for an exception to filing Schedule K-2 (Form 1120-S) ☐		
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties – gross income	15d	
	e Oil, gas, and geothermal properties – deductions	15e	
	f Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	1,531
	d Distributions (attach statement if required) (see instructions)	16d	6,103
	e Repayment of loans from shareholders	16e	
	f Foreign taxes paid or accrued	16f	

Schedule K Shareholders' Pro Rata Share Items (continued)

Other Information		Total amount	
		17a	
	17a Investment income		
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	d Other items and amounts (attach statement)		
Reconciliation	18 Income (loss) reconciliation. Combine the total amounts on lines 1 through 10. From the result, subtract the sum of the amounts on lines 11 through 12e and 16f	18	12,424

Schedule L Balance Sheets per Books

		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		600		5,543
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts	()		()	
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach statement)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (attach statement)				
10a	Buildings and other depreciable assets	5,982		5,982	
b	Less accumulated depreciation	(3,826)	2,156	(3,979)	2,003
11a	Depletable assets				
b	Less accumulated depletion	()		()	
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization	()		()	
14	Other assets (attach statement)				
15	Total assets		2,756		7,546
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach statement)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach statement)				
22	Capital stock		100		100
23	Additional paid-in capital				
24	Retained earnings		2,656		7,446
25	Adjustments to shareholders' equity (attach statement)				
26	Less cost of treasury stock	()		()	
27	Total liabilities and shareholders' equity		2,756		7,546

Form **1120-S** (2025)

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**Note:** The corporation may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books	10,893	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		a Tax-exempt interest \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12e, and 16f (itemize):		6 Deductions included on Schedule K, lines 1 through 12e, and 16f, not charged against book income this year (itemize):	
a Depreciation \$		a Depreciation \$	
b Travel and entertainment \$ 1,531	1,531	7 Add lines 5 and 6	
4 Add lines 1 through 3	12,424	8 Income (loss) (Schedule K, line 18). Subtract line 7 from line 4	12,424

Schedule M-2 Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account
(see instructions)

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year	2,656			
2 Ordinary income from page 1, line 22	12,424			
3 Other additions				
4 Loss from page 1, line 22	()			
5 Other reductions Stmt 2	(1,531)			()
6 Combine lines 1 through 5	13,549			
7 Distributions	6,103			
8 Balance at end of tax year. Subtract line 7 from line 6	7,446			

Federal Statements

FYE: 12/31/2025

Statement 1 - Form 1120-S, Page 1, Line 20 - Other Deductions

<u>Description</u>	<u>Amount</u>
OFFICE EXPENSE	\$ 1,750
PARKING & TOLLS	205
CONTINUING ED/TRAINING	180
CONFERENCES	4,512
INSURANCE EXPENSE	2,528
INTERNET	1,068
TELEPHONE	803
AUTO EXPENSE	2,885
50% of Meals	1,532
Total	<u>\$ 15,463</u>

Statement 2 - Form 1120-S, Page 5, Schedule M-2, Line 5(a) - Other Reductions

<u>Description</u>	<u>Amount</u>
Travel & Entertainment	\$ 1,531
Total	<u>\$ 1,531</u>

Taxpayer Copy

FYE: 12/31/2025

Federal Statements
MELISA GIOVANNELLI

Schedule K-1, Box 16, Code C - Nondeductible Expenses

Description	Shareholder Amount
Page 1 Meals	\$ 1,531
Total	\$ 1,531

Taxpayer Copy

Federal Asset Report

FYE: 12/31/2025

Form 1120-S, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:										
1	COMPUTERS/PRINTERS	7/01/2018	2,156			X	0	5 HY 200DB	2,156	0
2	LEASEHOLD IMPROVEMENTS	1/01/2013	3,826				3,826	25 HY S/L	1,670	153
			<u>5,982</u>				<u>3,826</u>		<u>3,826</u>	<u>153</u>
Grand Totals			5,982				3,826		3,826	153
Less: Dispositions and Transfers			0				0		0	0
Less: Start-up/Org Expense			0				0		0	0
Less: Domestic R & E Expense			0				0		0	0
Net Grand Totals			<u>5,982</u>				<u>3,826</u>		<u>3,826</u>	<u>153</u>

Taxpayer Copy