

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 04/11/2023

General Information

Name: Hon Kelly Owens

Address: 13075 SE 34th St, Okeechobee, FL 34974

PID 98811

County: Okeechobee

AGENCY INFORMATION

Organization	Suborganization	Title
CareerSource Heartland; Region 19	Board of Directors	County Commissioner District 5
Central Fla. Reg. Planning Council	Council Board	Okeechobee County Commissioner
Okeechobee County	Elected Constitutional Officer	County Commissioner, District 5

Net Worth

My Net Worth as of April 11, 2023 was \$ 1,582,370.00.

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, whether owned or leased.

The aggregate value of my household goods and personal effect is \$ 235,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
13075 SE 34th Street, Okeechobee, FL 34974	\$ 396,000.00
UBS Portfolio	\$ 626,000.00
SouthState Bank Accounts	\$ 57,370.00
Smith Family Trust (1/3)	\$ 268,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

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

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.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Okeechobee County Board of County Commissioners	304 NW 2nd Street, Okeechobee, FL 34974	\$ 41,333.00

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Business Entity	Major Sources of Business Income	Address	Principal Business Activity of Source
N/A			

Interests in Specified Businesses**Business Entity # 1**

N/A

Training

☒ 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.

Kelly Owens

Digitally signed: **04/11/2023**

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