

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 08/23/2023

General Information

Name: Hon Lal Spencer Roach III

Address: 3436 MARINATOWN LN STE 6, N FT MYERS, FL 33903

PID 277970

County: Lee

AGENCY INFORMATION

Organization	Suborganization	Title
House Of Representatives	Elected Constitutional Officer	State Representative

Net Worth

My Net Worth as of August 23, 2023 was \$ 355,863.69.

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 \$ 56,208.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
4191 Orange Grove Blvd, N Fort Myers, FL 33903	\$ 261,426.00
12490 Eagle Perch Lane, Cape Coral, FL 33903	\$ 298,350.00
FRS Investment Plan	\$ 16,796.45
Bank Accounts held at Lake Michigan Credit Union	\$ 10,216.01

Liabilities**LIABILITIES IN EXCESS OF \$1,000:**

Name of Creditor	Address of Creditor	Amount of Liability
PennyMac Loan Services, LLC	PO Box 660929, Dallas, TX 75266-0929	\$ 190,162.67
Lake Michigan Credit Union	17830 Ben Hill Griffin Pkwy, Fort Myers, FL 33913	\$ 108,352.74
U.S. Small Business Administration	14925 Kingsport Road, Fort Worth, TX 76155	\$ 25,000.00
Discover Personal Loans	PO Box 71244, Charlotte, NC 28272-1244	\$ 18,868.28
American Express	PO Box 6031, Carol Stream, IL 60197-6031	\$ 13,500.00

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.

☐ I elect to file a copy of my 2022 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
USCG Pay & Personnel Center	444 SE Quincy St, Topeka, KS 66683-3591	\$ 46,438.00
State of Florida	200 E Gaines Street, Tallahassee, FL 32399-0356	\$ 28,809.70
Law Office of Jeffrey M. Janeiro, P.L.	3400 Tamiami Trail N, Suite 203, Naples, FL 34103	\$ 7,500.00

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.

Lal Spencer Roach III

Digitally signed: **08/23/2023**

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