

2024 Form 6F - Final Full and Public Disclosure of Financial Interests

Filed with COE: 11/25/2024

General Information

Name: Mrs Kelly Owens

PID 98811

THE LAST DAY OF MY PUBLIC OFFICE OR POSITION WAS: 11/19/2024

AGENCY INFORMATION

Organization	Suborganization	Title
Okeechobee County	Elected Constitutional Officer	County Commissioner, District 5

Net Worth

My Net Worth as of November 19, 2024 was \$ 1,820,082.00.

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 \$ 258,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Single family house, 13075 SE 34th St, Okeechobee, FL	\$ 413,000.00
UBS Portfolio	\$ 693,899.00
SouthState Bank Accounts	\$ 111,280.00
Smith Family Trust 33 percent	\$ 225,000.00
FL DROP	\$ 40,281.00
Nationwide 457 Account	\$ 78,622.00

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

Please complete the following statement identifying each separate source and amount of income which exceeded \$1,000 received during the period from January 1, 2024, through the last date you held the office or position, 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	\$ 40,000.00

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

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6F and that the facts stated in it are true.

Kelly Owens

Digitally signed: **11/25/2024**

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