2024 Form 1 - Statement of Financial Interests

Filed with COE: 06/23/2025

General Information

Name: Alison Strange

PID 311634

AGENCY INFORMATION

Organization	Suborganization	Title
Clermont	City Council	Council Member

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2024.

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
THE Spring Games, LLC	2350 Legends Way, Clermont	Events and Tourism
Alison Strange & Associates, LLC	700 Almond Street, Clermont	Consulting Company
Suffragette Softball, LLC	700 Almond Street, Clermont	Technology Company
Real Estate Investment (Sale)	S. Indiana Avenue, Groveland, FL 34736	Sale of Investment Real Estate

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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
S. Indiana Avenue, Groveland, FL 34736 (2 vacant lots)

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
Bank Account (Mainstreet Bank)	Personal Checking
Bank Account (Mainstreet Bank)	Personal Savings
Bank Account (Mainstreet Bank)	Minor Child's Savings
Bank Account (Mainstreet Bank)	THE Spring Games Checking
Bank Account (Mainstreet Bank)	THE Spring Games Savings
Bank Account (Mainstreet Bank)	Suffragette Softball Checking
Bank Account (City National Bank of FL)	Suffragette Softball Checking
Bank Account (Mainstreet Bank)	Fastpitch TV Network Checking

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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
Sloan Servicing	P.O. Box 87090, Lincoln, NE 68501-7090
Bank of America	PO Box 17237, Wilmington, DE 19886-7237

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

Alison Strange

Digitally signed: **06/23/2025**

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