2024 Form 1 - Statement of Financial Interests

Filed with COE: 04/05/2025

General Information

Name: Paul Anthony Sinnott

PID 315338

AGENCY INFORMATION

Organization	Suborganization	Title
St. Lucie Village	Board Of Aldermen	Alderman

CANDIDATE FOR

Position	Agency Name	Position sought or held
City, Town or Village (Commission or Council), Governing Board - Form 1 (Effective 6/10/2024)	Town of St. Lucie Village	Board of Aldermen

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**
Social Security	Wilkes-Barre, PA	US Government
FRS	Tallahassee, FL	State of Florida
Wells Fargo Advisors	Sioux Falls, SD	Financial Services

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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
3107 N. Indian River Drive

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
CD	PNC Bank
IRA	Wells Fargo
Retirement account	Florida FRS
Money Market	PNC Bank
Investment Act	Wells Fargo

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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
N/A	

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

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

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Signature of Filer

Paul Anthony Sinnott Sr

Digitally signed: **04/05/2025**

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