

FORM 1

STATEMENT OF FINANCIAL INTERESTS

2021

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

BRIGGS, MARION B

MAILING ADDRESS :

787 Pondella Road

N. Ft. Myers

CITY : FLORIDA ZIP : 33903 COUNTY : LEE

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT : MPO
CITIZENS ADVISORY - AFFORDABLE HOUSING

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

✓
6/27

202112310843 SDF Lee Co FL

**** THIS SECTION MUST BE COMPLETED ****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2021.

MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]

(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
SUN COUNTRY HOMES OF FLORIDA	787 Pondella Rd. N. Ft. Myers, FL 33903	Contractor

PART B -- SECONDARY SOURCES OF INCOME

[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions]

(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			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

SEE ATTACHED

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]
(If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
Stock	Coast Business Bank

PART E — LIABILITIES [Major debts - See instructions]
(If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
LAKE MICHIGAN CREDIT UNION -	
SUNCOAST CREDIT UNION -	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]
(If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
	SUN COUNTY HOME OFFICERS	
ADDRESS OF BUSINESS ENTITY	787 PANDORA CIRCLE N.W.	
PRINCIPAL BUSINESS ACTIVITY	Contractor	
POSITION HELD WITH ENTITY	owner / president	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	90%	
NATURE OF MY OWNERSHIP INTEREST	Stock	

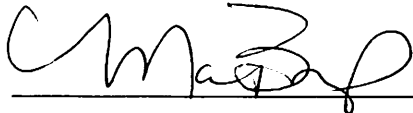
PART G — TRAINING For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE OF FILER:

Signature:



Date Signed:

4/27/22

CPA or ATTORNEY SIGNATURE ONLY

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: _____

Date Signed: _____

FILING INSTRUCTIONS:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

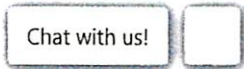
WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file **within 30 days** of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying papers.

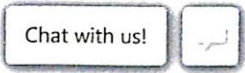
Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2021.

Search by Name for 'MBH' found 39 matches



STRAP / Folio ID	Owner	Site Address / Property Description	Links
09-44-24-01-00003.0120	BRIGGS MARION TR FOR MBH TRUST	787 PONDELLA RD NORTH FORT MYERS FL 33903	Parcel Details Aerial Viewer Tax Estimator Variance Report View Comps Change Address 2021 TRIM
10159080	787 PONDELLA RD NORTH FORT MYERS FL 33903	SUBURBAN PARK BLK 3 PB 9 PG 117 LOT 12 N 1/2+ LT LT 13 LES R/W + INT IN LAK	
36-43-27-01-00001.0300	BRIGGS MARION TR FOR MBH TRUST	3001 LOUIS AVE ALVA FL 33920	Parcel Details Aerial Viewer Tax Estimator Variance Report View Comps Change Address 2021 TRIM
10357580	787 PONDELLA RD NORTH FORT MYERS FL 33903	LEHIGH ACRES UNIT 00 BLK 1 PB 15 PG 101 LOT 30	
36-43-27-01-00001.0310	BRIGGS MARION TR FOR MBH TRUST	2905 LOUIS AVE ALVA FL 33920	Parcel Details Aerial Viewer Tax Estimator Variance Report View Comps Change Address 2021 TRIM
10357581	787 PONDELLA RD NORTH FORT MYERS FL 33903	LEHIGH ACRES BLK 1 PB 15 PG 101 LOTS 31 + 32	
36-43-27-00-00003.0090	BRIGGS MARION TR FOR MBH TRUST	2909 LOUIS AVE ALVA FL 33920	Parcel Details Aerial Viewer Tax Estimator Variance Report View Comps Change Address 2021 TRIM
10476036	787 PONDELLA ROAD NORTH FORT MYERS FL 33903	PAR IN SW 1/4 OF SE 1/4 AS DESC IN OR 3843 PG 4062	
03-47-24-W1-	FMBH LLC 501 GOODLETTE RD N STE D100	6890 ESTERO BLVD MYERS BEACH FL 33931	



Database Search

[Property Information](#) [Deed/Recording Information](#) [Tangible Personal Property Information](#)

Search by Name for 'MBH' found 39 matches

STRAP / Folio ID	Owner	Site Address / Property Description	Links
09-43-24-01-00003.0010	BRIGGS MARION TR FOR MBH TRUST 787 PONDELLA RD	2971 NORTH RD NORTH FORT MYERS FL 33917	Parcel Details Aerial Viewer Tax Estimator Variance Report View Comps
10130701	NORTH FORT MYERS FL 33903	WESTERN ACRES UNREC OR 596 PG 573 W 148 FT OF LT 3	Change Address 2021 TRIM
04-44-24-01-00000.0240	BRIGGS MARION TR FOR MBH TRUST 787 PONDELLA RD	1206 PONDELLA CIR NORTH FORT MYERS FL 33903	Parcel Details Aerial Viewer Tax Estimator Variance Report View Comps
10152832	NORTH FORT MYERS FL 33903	PONDELLA CIR PB 12 PG 98 LOT 24 + PARL OR1655/0893 LESS R/W OR 2308 PG 1083	Change Address 2021 TRIM

059252



"Truth will ultimately prevail where
there is pains taken to bring it to light."

George Washington

Marion Briggs
787 Pondella Rd.
North Fort Myers, FL 33903-5761

22 JUN 25 9A 08 43 SOE L 00 04 1

FT MYERS FL 339
27 JUN 2022 PM 1 L



BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 1021 FT MYERS FL

POSTAGE WILL BE PAID BY ADDRESSEE

SUPERVISOR OF ELECTIONS
PO BOX 2545
FORT MYERS FL 33902-9888

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

