

# FORM 1

# STATEMENT OF FINANCIAL INTERESTS

# 2022

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

**FOR OFFICE USE ONLY:**

LAST NAME -- FIRST NAME -- MIDDLE NAME :

MAILING ADDRESS :

CITY : ZIP : COUNTY :

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

CHECK ONLY IF  CANDIDATE OR  NEW EMPLOYEE OR APPOINTEE

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

**DISCLOSURE PERIOD:**

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2022.

**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

**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

**PART C -- REAL PROPERTY** [Land, buildings owned by the reporting person - See instructions]  
(If you have nothing to report, write "none" or "n/a")


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
Shareholder	Automotive Video Innovations, Inc.
Stocks-Detail Equity Sector Analysis	See Attached page

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
Synovus Bank	7900 Summerlin Lakes Drive Fort Myers, FL, 33907

**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
	None	
ADDRESS OF BUSINESS ENTITY	None	
PRINCIPAL BUSINESS ACTIVITY	None	
POSITION HELD WITH ENTITY	None	
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	None	
NATURE OF MY OWNERSHIP INTEREST	None	

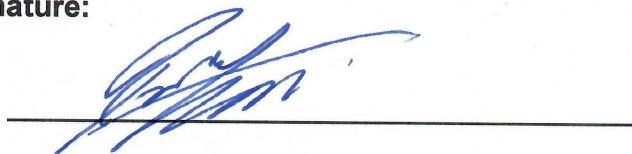
**PART G — TRAINING** For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 required to complete annual ethics training pursuant to section 112.3142, F.S.

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:

6/30/2023

**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, 2022.

**FORM 1 PART D CONTINUED**

**DETAIL OF EQUITY SECTOR ANALYSIS**

**CONSUMER COMM**

ALPHABET  
COMCAST  
META PLATFORMS  
VERIZON

**DISCRETIONARY**

ADVANCE AUTO  
AMAZON  
AMERICAN TOWER  
HOME DEPOT  
WALT DISNEY CO  
LOWES  
MCDONALDS  
MOTORCAR  
NIKE  
O'REILLY  
STARBUCKS  
TARGET  
JTX

**CONSUMER STAPLES**

ACCENTURE PLC  
BRITISH AMBER  
COCA COLA  
COSTCO  
DIAGEO  
WALMART  
ESTEE LAUDER  
SYSCO  
PROTOR & GAMBLE

**FINANCIALS**

AMERAPRISE  
DISCOVER  
GOLDMAN  
INTERNATIONAL  
DOUBLELINE SHILLER  
AMERICAN FUNDS  
JP MORGAN  
MARSH  
MORGAN STANLEY  
PRUDENTIAL FINANC  
S&P GLOBAL

TRAVELERS  
TRUIST  
WELLS FARGO  
AMX  
AMERIPRISE  
BLACKLOCK  
CHUBB  
BLACKSTONE  
CME  
VANGUARD

**HEALTH CARE**

ABBOTT  
DANAHER  
ABBVIE  
BOSTON SCIENTIFIC  
INTUITIVE  
MEDTRONICS  
MERCK  
NOVARTIS  
JOHNSON &  
JOHNSON  
PFIZER  
BECTONCONOCO  
THERMO FISHER  
SCIENTIFIC  
UNITED HEALTH

**INDUSTRIALS**

3M  
CATERPILLAR  
EATON  
EMERSON  
HONEYWELL INT INC  
LOCKHEED MARTIN  
NORFOLK  
RAYTHEON  
UPS  
UNION PACIFIC  
NORFOLK STHN  
PARKER HANNIFIN  
REPUBLIC SERVICES

ROCKWELL  
AUTOMATION  
RESIDEO  
WASTE MGMNT  
MATERIALS PKG

**INFORMATION TECH**

ACCENTURE PLC  
ADOBE SYSTEMS  
ANALOG  
APPLE  
APPLIED  
AUTOMATIC DATA  
BROADCOM  
CISCO  
FIDELITY  
INTEL  
MICROSOFT  
PAYCHEX  
SALESFORCE  
TEXAS INST  
VISA INC CLA

**REAL ESTATE**

CROWN CASTLE  
AMERICAN TOWER  
PROLOGIS

**UTILITIES**

ALLIANT  
AMER ELECTRIC  
CONS EDISON  
NEXERTA  
SOUTHERN

**ENERGY**

CONOPHILIPS  
EOG RESOURCES  
PHILLIPS 66  
EXXON