

2023 Form 1 - Statement of Financial Interests

Filed with COE: 03/29/2024

General Information

Name: Scott Edson

Address: 4254 Green River Place, Middleburg, FL 32068

PID 307933

County: Clay

AGENCY INFORMATION

Organization

Suborganization

Title

Ridgewood Trails Community Development
District

Board of Supervisors

SEAT #3

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2023 .

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
NASA FEDERAL CREDIT UNION	500 PRINCE GEORGES BLVD+UPPER MARLORORO MD 20774	FEDERAL CREDIT UNION
PENTAGON FEDERAL CREDIT UNION	P O BOX 1432+ALEXANDRIA VA 22313-2032	FEDERAL CREDIT UNION
ALLY BANK	P O BOX 951+HORSHAM, PA 10944	BANK
BMY MELLON-FMC TRUST	P O BOX 20+LINCOLNSHIRE, IL 600690002	DISBURSENT AGENT
UNITED STATES SOCIAL SECURITY	DEPARTMENT OF THE TREASURY=INTERNAL RECENUE SERVICE	U S GOVERMENT-RETIREMENT
MERRILL LYNCH	1500 AMERICAN BLVD+PENNINGTON NJ 08534-4129	INVESTMENTS
CHARLES SCHWAB	P O BOX 2209+OMAHA NE 68103-2209	INVESTEMINTS

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
N/A

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
AMICA INSURANCE	ANNUITY

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

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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.

Signature of Filer

Scott Edson

Digitally signed: 03/29/2024

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