

**OF FINANCIAL INTERESTS**

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

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:  
 Little Melton Harry

MAILING ADDRESS:  
 6033 34th St W #126

CITY : ZIP : COUNTY :  
 Bradenton 34210 Manatee

NAME OF AGENCY :  
 Manatee County Commissioner

NAME OF OFFICE OR POSITION HELD OR SOUGHT :  
 District 4

CHECK IF THIS IS A FILING BY A CANDIDATE

2018 JUN 19 PM 12 23  
 BRADENTON, FL 34209  
 MANATEE COUNTY  
 OFFICE OF THE  
 COUNTY CLERK

**PART A -- NET WORTH**

Please enter the value of your net worth as of December 31, 2017 or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of December 31, 20 17 was \$ 3,186,114.

**PART B -- ASSETS**

**HOUSEHOLD GOODS AND PERSONAL EFFECTS:**

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effects (described above) is \$ 20,000

**ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:**

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
3707 Avenida Madera Bradenton	353,842.00
6033 34th St W # 126 Bradenton	94,000.00
2408 43rd Ave W Bradenton	87,736.00
Bank Accounts- Harbor Community Bank	209,357.00

**PART C -- LIABILITIES**

**LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Harbor Community Bank Mortgage 600 Edwards Rd Ft. Pierce FL	63,874.96
Wells Fargo Mortgage PO Box 14411 Des Moines IA	290,820.79
Scott Kallins 433 8th Ave W Palmetto	150,000.00
Kallins & Little 433 8th Ave W Palmetto	90,207.04

**JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

**PART D -- INCOME**

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2017 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

I elect to file a copy of my 2017 federal income tax return and all W2's, schedules, and attachments.  
 [If you check this box and attach a copy of your 2017 tax return, you need not complete the remainder of Part D.]

**PRIMARY SOURCES OF INCOME (See instructions on page 5):**

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
Kallins, Little, Delgado, P.A	433 8th Ave W Palmetto	420,190.00

**SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:**

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

**PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]**

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY			
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

**PART F - TRAINING**

For officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

**OATH**

STATE OF FLORIDA  
 COUNTY OF MANATEE

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

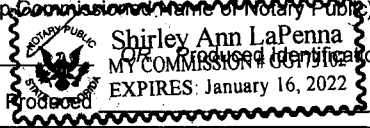
Sworn to (or affirmed) and subscribed before me this 8th day of

June, 2018 by \_\_\_\_\_

Shirley Ann LaPenna  
 (Signature of Notary Public--State of Florida)

SHIRLEY ANN LaPenna 1/16/22  
 (Print, Type, or Stamp Commission Name of Notary Public)

Personally Known \_\_\_\_\_  
 Type of Identification Produced \_\_\_\_\_



[Signature]  
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

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 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

\_\_\_\_\_  
 Signature Date

**Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.**

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

Part B Assets

Attachment to Form 6- Melton Little

ASSETS INDIVIDUALLY VALUE AT OVER \$1000			Value
2015 Mitsubishi			18,000.00
2012 Volvo			12,000.00
Fidelity Brokerage			764,040.00
Fidelity IRA Stocks			261,809.00
John Hancock Deferred Income			210,963.00
Loan Receivable Justin & Misty Bentley			17,747.13
50% Interest in Kali Rental			349,757.50
50% Interest in Kallins, Little Delgado			985,318.00
50% Interest in Bolika Corporation			143,447.00
42 % Argentina Property San Martin De Los Andes			273,000.00

Total Assets per Attachment

3,036,081.63

RECEIVED  
 2015 JUN 10 4PM 12 23  
 FEDERAL RESERVE BANK OF PHOENIX