

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:

SMITH CHARLES BERNARD

MAILING ADDRESS:

1701 4TH AVE West

PALMETTO FL 34721 MANATEE

CITY:

ZIP:

COUNTY:

NAME OF AGENCY:

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

MANATEE COUNTY COMMISSION (2)

CHECK IF THIS IS A FILING BY A CANDIDATE

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MANATEE COUNTY
SUPERVISOR OF ELECTIONS

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2021 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 2021 was \$ 1,038,514

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 \$ 65,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)

VALUE OF ASSET

SEE ATTACH

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

SUNCOAST CREDIT UNION / LOAN
6367 MANATEE AVENUE WEST
BRADENTON, FL 34709

\$6,486.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

N / A

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 2021 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 2021 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2020 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
MANATEE HARVESTING CO	1707 2ND AVE EAST PALMETTO FL. 34221	\$55,000

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 SOURCE OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
Smith GLOBAL Enterprises INC	MELALAXA INC	1701 4TH AVE W PALMETTO FL. 34221	MARKETING CONSULTING

PART E -- INTERESTS IN SPECIFIED BUSINESSES (Instructions on page 6)

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
	MANATEE HARVESTING CO	SMITH GLOBAL ENTERPRISES INC	MANATEE EQUIPMENT INC
ADDRESS OF BUSINESS ENTITY	1707 2ND AVE EAST PAL FL 34221	1701 4TH AVE W PALMETTO FL 34221	12TH AVE EAST PALMETTO FL 34221
PRINCIPAL BUSINESS ACTIVITY	FARMING/CONTRACT	MARKETING/CONSULTING	
POSITION HELD WITH ENTITY	DIRECTOR		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST	FARMING/CONTRACT	MARKETING/CONSULTING	

PART F - TRAINING

This section applies only to officers required to complete annual ethics training pursuant to section 112.3142, F.S. [See instructions p. 6]

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

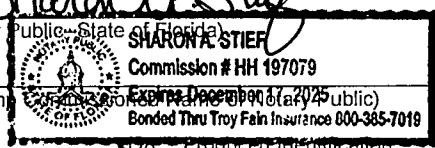
OATH

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.

STATE OF FLORIDA
 COUNTY OF Manatee
 Sworn to (or affirmed) and subscribed before me by means of
 physical presence or online notarization, this 13th day of

June, 2022 by

(Signature of Notary Public, State of Florida)



(Print, Type, or Stamp)

Personally Known

Type of Identification Produced Drivers License

Charles B. Smeed
 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

ASSETS INDIVIDUALLY ^{FairMarked} VALUED AT OVER \$1000.

- 1) MANATEE Equipment 25% owner : \$80, Thous
Trailers fruit / Umbrella for CO MANATEE 1270 12TH AVE
EAST Palmetto
FL 34221
- 2) MANATEE Harvesting CO, CORPORATE \$ 250 Thous
50% 1707 2ND AVE EAST PALMETTO FL 34221
NO MORTGAGE
- 3) PROPERTY OWN 2 ACHORS 4311 89TH ST
EAST PALMETTO FL 34221 \$250 Thous
- 4) PROPERTY HOME 1701 4TH AVE West
Palmetto FL 34221 NO MORTGAGE \$400 Thous
- 1) FLORIDA CENTRAL CREDIT UNION
701 9TH STREET WEST BRADENTON, FL 34205
- 2) SUNCOAST CREDIT UNION
6367 MANATEE AVENUE WEST BRADENTON, FL 34209
- 3) SOUTHWEST BANK
410 8TH AVE W. PALMETTO, FL 34221

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