

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

OF FINANCIAL INTERESTS

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:
 DEAN ISAAC H

MAILING ADDRESS:
 224 N FOREST DUNE DR

CITY: ZIP: COUNTY:
 SAINT AUGUSTINE FL 32080-8720

NAME OF AGENCY:
 ST JOHNS COUNTY, ELECTED CONSTITUTIONAL OFFICER

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
 COUNTY COMMISSIONER DISTRICT 5

CHECK IF THIS IS A FILING BY A CANDIDATE

SUPERVISOR OF ELECTIONS
 2020 JUN -4 AM 10:20
 ST JOHNS COUNTY
 VICKY OAKES

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2019 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 19 was \$ 2,191,464.00.

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 \$ 100,000.00

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
SEE ATTACHED ADDENDUM	

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
AMERIHOM MORTGAGE COMPANY, LLC 21215 BURBANK BLVD, WOODLAND HILLS, CA 91367	\$249,618.50

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 2019 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 2019 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2019 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
SEE ATTACHED ADDENDUM		

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	HENRY DEAN & ASSOC		
ADDRESS OF BUSINESS ENTITY	5400 WINDANDTIDE RD, SAINT AUGUSTINE, FL 32080	224 N. Forest Drive Dele	
PRINCIPAL BUSINESS ACTIVITY	LAW FIRM		
POSITION HELD WITH ENTITY	PRESIDENT		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	YES		
NATURE OF MY OWNERSHIP INTEREST	100% OWNER		

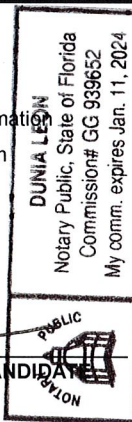
PART F - TRAINING

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

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 St. Johns

Sworn to (or affirmed) and subscribed before me by means of
 physical presence or online notarization, this 1st day of

June 2020 by Isaac Henry Dean
Dunia Leon
 (Signature of Notary Public--State of Florida)

Dunia Leon
 (Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known _____ OR Produced Identification

Type of Identification Produced FL DL

[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

Form 6 Full and Public Disclosure of Financial Information

Addendum to Page 1

Assets Individually Valued at over \$1,000

<u>Description of Asset</u>	<u>Value of Asset</u>
224 North Forest Dune Drive, St. Augustine, FL 32080	1,100,000.00
Ameris Bank Checking, 790 N. Ponce De Leon Blvd, St. Augustine, FL 32084	80,000.00
Bank of America Checking, 3750 A1A S., St. Augustine, FL 32080	120,000.00
Closely held mortgage, James Strafford, 4425 US 1 South, St. Augustine, FL 32086	191,082.78
Merrill Lynch IRA, 1 New York Plaza, New York, NY 10004	850,000.00
TOTAL	<u>2,341,082.78</u>

Addendum to Page 2

Primary Sources of Income

<u>Name of Source of Income</u>	<u>Address of Source of Income</u>	<u>Amount</u>
ESG Limited Partnership	3333-24 Virginia Beach Blvd, Virginia Beach, VA 23452	28,700.00
SJC Board County Commissioners	4010 Lewis Speedway, St. Augustine, FL 32084	74,900.00
BOA Trused Individual Retirement	PO Box 1501 Pennington, NJ	37,400.00
James L Strafford	4425 US 1 South, St. Augustine, FL 32086	12,400.00
Florida Retirement System	PO Box 9000, Tallahassee, FL 32315	104,100.00
Henry Dean and Associates, LLC	224 North Forest Dune Drive, St. Augustine, FL 32080	40,100.00
Social Security Administration	1100 West High Rise, Baltimore, MD 21235	32,000.00
		<u>329,600.00</u>