BEFORE THE
STATE OF FLORIDA
COMMISSION ON ETHICS

In re JAIME LOPEZ	)	Financial Disclosure Appeal No. FD 21-080
	)	
Appellant.	)	Final Order No. XXX
	)	

FINAL ORDER

This matter came before the Commission on Ethics on its own motion during its meeting in public session on October 23, 2026, pursuant to Section 112.3145(8)(g), Florida Statutes, (subsequently renumbered to Section 112.3145(8)(f)) which assesses an automatic fine of $25 per day on a person who fails to timely file a required CE Form 1, Statement of Financial Interests. The Commission may waive the fine in whole or in part for good cause shown, based on "unusual circumstances" surrounding the failure to file by the designated date. There are no matters in dispute. Appellant did not request a hearing.

Findings of Fact

1. According to information provided to the Commission, Appellant served as a member of the Fronterra Community Development District Board of Supervisors, a position requiring the filing of a 2020 CE Form 1, Statement of Financial Interests. In 2020, the designated due date for submitting a 2020 CE Form 1 was July 1, 2021, with a grace period ending on September 1, 2021.

2. No later than June 1, 2021, the Miami-Dade County Supervisor of Elections mailed a 2020 CE Form 1 to Appellant at 5245 NW 112th Ave., Apt. 3, Doral, FL 33178

3. No later than August 1, 2021, the Miami-Dade County Supervisor of Elections sent a notice of delinquency by certified mail to Appellant at 5245 NW 112th Ave., Apt. 3.

4. On September 8, 2021, the Commission on Ethics mailed a courtesy notice of fines accruing to Appellant at 4680 Saint Croix Ln., Apt. 528, Naples, FL 34109.

5. On September 21, 2021, the Miami-Dade County Supervisor of Elections received Appellant's 2020 CE Form 1.

6. On October 26, 2023, the Commission mailed a Notice of Assessed Fine to Appellant at 5245 NW 112th Ave., Apt. 3. It indicated that the total of Appellant's accrued automatic fine was $500 ($25 per day for 20 days late) and provided that the Commission must receive an appeal of the fine by November 27, 2023.

7. On January 25, 2024, the Commission received Appellant's appeal of his automatic fine for Form Year 2020. In Part B of his appeal form, Appellant checked "Lack of Notification – Failure to receive notice" as the general reason for his appeal. In Part C of his appeal form, where an appellant is asked to provide a detailed explanation of his or her appeal, Appellant wrote that he did not receive the forms because he relocated to a new address multiple times and the forms were sent to his prior address.

Conclusions of Law

8. The Commission has jurisdiction over the subject matter of this proceeding pursuant to Section 112.3145, Florida Statutes.

9. Financial disclosure is required of public officials and employees because it enables the public to evaluate potential conflicts of interest, deters corruption, and increases public confidence in government.

10. Section 112.3145(8)(g)3., Florida Statutes, (subsequently renumbered to Section 112.3145(8)(f)(2)) states:

> Any reporting person may appeal or dispute a fine, based upon unusual circumstances surrounding the failure to file on the

> designated due date, and may request and is entitled to a hearing before the commission, which may waive the fine in whole or in part for good cause shown. Any such request must be in writing and received by the commission within 30 days after the notice of payment due is transmitted. In such a case, the reporting person must, within the 30-day period, notify the person designated to review the timeliness of reports in writing of his or her intention to bring the matter before the commission. For purposes of this subparagraph, the term "unusual circumstances" does not include the failure to monitor an e-mail account or failure to receive notice if the person has not notified the commission of a change in his or her e-mail address.

11. Pursuant to Rule 34-8.215(4), F.A.C., "unusual circumstances" means uncommon, rare or sudden events over which the reporting individual had no control and which directly result in the failure to act in accordance with the filing requirements. Circumstances which allow for time in which to take those steps necessary to ensure compliance with the filing requirements shall be deemed not to constitute unusual circumstances.

12. Here, Appellant stated that he did not receive the forms because he relocated to a new address multiple times and the forms were sent to his prior address. Considering Appellant's claims, and that there is no evidence showing otherwise, there are "unusual circumstances" here that prevented the timely filing of the financial disclosure form that justify waiving the $500 fine.

Order

Based on the foregoing facts and conclusions of law, the Commission hereby finds that unusual circumstances for failure to timely file have been demonstrated. We therefore waive the assessed fine of $500.

ORDERED by the State of Florida Commission on Ethics meeting in public session on October 23, 2026.

Date Rendered

Jeremy M. Rodgers
Chair, Florida Commission on Ethics

THIS ORDER CONSTITUTES FINAL AGENCY ACTION. ANY PARTY WHO IS ADVERSELY AFFECTED BY THIS ORDER HAS THE RIGHT TO SEEK JUDICIAL REVIEW UNDER SECTION 120.68, AND SECTION 112.3241, FLORIDA STATUTES, BY FILING A NOTICE OF ADMINISTRATIVE APPEAL PURSUANT TO RULE 9.110 FLORIDA RULES OF APPELLATE PROCEDURE, WITH THE CLERK OF THE COMMISSION ON ETHICS, AT EITHER 325 JOHN KNOX ROAD, BUILDING E, SUITE 200, TALLAHASSEE, FLORIDA 32303 OR P.O. DRAWER 15709, TALLAHASSEE, FLORIDA 32317-5709; AND BY FILING A COPY OF THE NOTICE OF APPEAL ATTACHED TO WHICH IS A CONFORMED COPY OF THE ORDER DESIGNATED IN THE NOTICE OF APPEAL ACCOMPANIED BY THE APPLICABLE FILING FEES WITH THE APPROPRIATE DISTRICT COURT OF APPEAL. THE NOTICE OF ADMINISTRATIVE APPEAL MUST BE FILED WITHIN 30 DAYS OF THE DATE THIS ORDER IS RENDERED.

JMR: jfh

Jaime Lopez
255 SW 11th St.
Apt. 1912
Miami, FL 33130

21-080 265586

STATE OF FLORIDA
COMMISSION ON ETHICS

325 John Knox Road
Building E, Suite 200
Tallahassee, FL 32303
Telephone: (850) 488-7864
Fax: (850) 488-3077
Email: disclosure@leg.state.fl.us

FLORIDA
COMMISSION ON ETHICS
JAN 29 2024
RECEIVED

APPEAL OF AUTOMATIC FINE FOR FORM YEAR 2020

DIRECTIONS: The information you provide in this form is critical for processing your appeal in a timely manner.

In Part A, please provide current contact information. If your contact information changes while your appeal is being processed, please notify us.

In Part B, please check any boxes that specify the general reason(s) for your appeal.

In Part C, please explain in detail the reason(s) for your appeal. In addition to your written explanation in Part C, you may attach any documents that support your appeal.

IMPORTANT: TO PRESERVE YOUR RIGHT TO APPEAL, THIS FORM OR OTHER WRITTEN APPEAL (AND ANY ATTACHMENTS) MUST BE FILED WITH (RECEIVED BY) THE COMMISSION ON ETHICS WITHIN THIRTY (30) DAYS OF THE DATE THE NOTICE OF ASSESSMENT OF AUTOMATIC FINE WAS MAILED TO YOU.

PLEASE SEND YOUR COMPLETED FORM TO ONE OF THE FOLLOWING:

Mailing Address: Commission on Ethics
P.O. Drawer 15709
Tallahassee, FL 32317-5709

Physical Address: Commission on Ethics
325 John Knox Road
Building E, Suite 200
Tallahassee, FL 32303

Fax: (850) 488-3077

Email: disclosure@leg.state.fl.us

PART A: YOUR INFORMATION

Name: JAIME LOPEZ

Address: 255 SW 11th STREET APT 1912 City: MIAMI State: FL Zip: 33130

Daytime Tel.: 239-404-4003 Cell: SAME

Email: JLOPEZ@BARRONCOLLIER.COM Filer ID# (if known): PID#: 265586

Public Employer:

Public Position:

CONTINUED ON REVERSE SIDE

PART B: GENERAL REASON(S) FOR YOUR APPEAL

Please choose any/all reasons that apply to your appeal.

I hereby appeal the Notice of Assessment of Automatic Fine on the following basis:

a. [ ] **Sickness or injury** (Explain in Part C and attach a statement from attending physician, including dates and nature of illness or injury)

b. [X] **Lack of notification – Failure to receive notice** (Explain in Part C and provide documentation that supports your assertion that you never received certified mail delinquency notice: for example, incorrect address; misdelivered mail; change in employment; extended absence from home, etc.)

c. [ ] **Claim of timely filing of financial disclosure** (Explain in Part C and provide copy of certified mail receipt and/or copy of completed form which had been previously filed, along with a sworn notarized statement that you filed prior to the deadline)

d. [ ] **Left public position prior to December 31, 2020** (Explain in Part C and provide confirmation from agency that your office-holding/employment ended before 12/31/2020)

e. [ ] **Other unusual circumstance** (Explain in Part C and provide documentation explaining uncommon, rare, or sudden occurrence that prevented timely filing prior to deadline)

f. [ ] **Not required to file** (Explain in Part C and provide documentation that supports reason for not required to file)

PART C: DETAILED EXPLANATION OF YOUR APPEAL

Please provide a detailed explanation of your appeal, including why each option you selected in Part B is applicable to you. You may use the space provided and/or attach additional pages.

PLEASE SEE ATTACHED DOCUMENTATION

OPTIONAL REQUEST FOR HEARING

[ ] In addition to this written appeal, I specifically request to appear before the Commission in a hearing pursuant to Section 112.3144(8)(f)3 or Section 112.3145(8)(g)3, Florida Statutes. Commission meetings occur in Tallahassee.

SIGNATURE

I have received and read the Notice of Assessment of Automatic Fine and its instructions on How to Appeal and I understand my options. I am requesting disposition of this matter as indicated.

1/24/2024
DATE

SIGNATURE

Kimberly Homes
Program Administrator
Florida Commissions on Ethics
325 John Knox Road, Building E, Ste. 200
Tallahassee, FL 32303

RE: Financial Disclosure (Form 1, Statement of Financial Interest – 2020) / PID#: 265586

Ms. Homes,

I hope this letter finds you well. I wanted to take this opportunity to plea my case on the fines against me pursuant to Section 112.3145(8)(g), Florida Statutes, due to the failure to timely file the 2020 CE Form 1 as a former member of the Fronterra Community Development District Board of Supervisors. I served on the board for five (5) years and faithfully filed my Form 1 every year.

There are a number of extenuating circumstances that fostered the delay in my filing of 2020 CE Form 1. During the period in question, and when notices had been mailed, I was relocating from Naples (Collier County) where I served on the District's Board, to Miami (Dade County). Due to this relocation, the notice was sent to the wrong address, and I was unaware of any failing to file Form 2020. CE Form 1.

When I was made aware that the filing had been missed, I immediately reached out to Emily Prine at the State and submitted the correct form as requested on September 21, 2021, with the understanding that the misunderstanding on the change of address could be rectified.

During 2023, I had to switch my residency again to assist my mother as she was diagnosed with cancer. Due to this switch, there was a Notice of Assessment of Automatic Fine that was mailed to my previous address on October 26, 2023. As I no longer reside in this address, I never received this notice. The current resident was kind enough to contact me at the beginning of the year with the mail that had been accumulated over the past couple of months which is what is prompted me to write this letter.

I am hopeful that due to the misunderstanding in the change of addresses, you will accept my appeal on the fines against me. I thank you in advance for your time and assistance in this matter. Please let me know if you have any questions.

Sincerely,

Jaime Lopez
255 SW 11th Street APT 1912
Miami, FL 33130

Additional support information: Reference emails attached.

Russ Weyer

From: Russ Weyer
Sent: Tuesday, September 21, 2021 1:37 PM
To: Jaime Lopez
Subject: Form 2020 I
Attachments: Form 1_2020i.pdf

Jaime,

I spoke with the state today. You did file the correct form I sent to you last week. However, the form in question is Form 2020i. I have attached that for you to fill out and immediately send it to Emily Prine at the State. Her email address is prine.emily@LEG.state.fl.us. Please try and fill it out and send today. No need to send it to the Miami-Dade County Supervisor of Elections. They have been tallying fines against you since it wasn't filed in time and this will at least stop the clock.

I spent quite a bit of time with her going over the situation as she had your old address on file while the letter that the Commission on Ethics sent you the letter to your new address. It sounded like the left hand didn't know what the right hand is doing up there. I told her that you have submitted form 2021 to the Miami-Dade Supervisor of Elections. I made sure that she took notes of our conversation and put them in your file. The reason for taking the notes is that they will be issuing you a fine letter after the first of the year. That letter will have an appeal process attached.

Let me know once you get that letter in January/February and I will help you get the fines eradicated based on the miscommunications that went on.

One question, did you receive any notices from the state after July 1 that your form 2020i had not been filed? I was wondering if those notices were sent to your old Naples address.

Please copy me on your email to Emily so I can keep that in the District records.

Thanks!

Regards,

Russ Weyer
President
Real Estate Econometrics, Inc.
Suite 100
707 Orchid Drive
Naples, FL 34102

(239) 269-1341

Rweyer@ree-i.com

REAL ESTATE ECONOMETRICS, INC

HTTP//WWW.REE-I.COM

Russ Weyer

From: Jaime Lopez <JLopez@barroncollier.com>
Sent: Tuesday, September 21, 2021 1:47 PM
To: prine.emily@LEG.state.fl.us
Cc: Russ Weyer
Subject: Form 2020i
Attachments: Form 1-2020.pdf

Good afternoon Emily,

Per your conversation with Russ Weyer, I have attached my completed Form 2020i. Please let me know if you need anything else.

Thank you for your assistance.

Sincerely,

Jaime Lopez

DAD COPY

265586

STATE OF FLORIDA
COMMISSION ON ETHICS

325 John Knox Road
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Telephone: (850) 488-7864
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Tallahassee, FL 32317-5709

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PART A: YOUR INFORMATION

Name: Jaime Lopez

Address: 255 SW 11th St APT 1912 City: Miami State: FL Zip: 33130

Daytime Tel.: 239-404-4003 Cell: 239-404-4003

Email: JLopez@barroncollier.com Filer ID# (if known): PID#: 265586

Public Employer:

Public Position:

CONTINUED ON REVERSE SIDE

PART B: GENERAL REASON(S) FOR YOUR APPEAL

Please choose any/all reasons that apply to your appeal.

I hereby appeal the Notice of Assessment of Automatic Fine on the following basis:

a. [ ] **Sickness or injury** (Explain in Part C and attach a statement from attending physician, including dates and nature of illness or injury)

b. [X] **Lack of notification – Failure to receive notice** (Explain in Part C and provide documentation that supports your assertion that you never received certified mail delinquency notice: for example, incorrect address; misdelivered mail; change in employment; extended absence from home, etc.)

c. [ ] **Claim of timely filing of financial disclosure** (Explain in Part C and provide copy of certified mail receipt and/or copy of completed form which had been previously filed, along with a sworn notarized statement that you filed prior to the deadline)

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Please see attached additional documentation

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[ ] In addition to this written appeal, I specifically request to appear before the Commission in a hearing pursuant to Section 112.3144(8)(f)3 or Section 112.3145(8)(g)3, Florida Statutes. Commission meetings occur in Tallahassee.

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Russ Weyer
President
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Suite 100
707 Orchid Drive
Naples, FL 34102

(239) 269-1341

Rweyer@ree-i.com

REAL ESTATE ECONOMETRICS, INC

HTTP//WWW.REE-I.COM

Russ Weyer

From: Jaime Lopez <JLopez@barroncollier.com>
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Cc: Russ Weyer
Subject: Form 2020i
Attachments: Form 1-2020.pdf

Good afternoon Emily,

Per your conversation with Russ Weyer, I have attached my completed Form 2020i. Please let me know if you need anything else.

Thank you for your assistance.

Sincerely,

Jaime Lopez

FORM 1 STATEMENT OF FINANCIAL INTERESTS 2020

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

LAST NAME – FIRST NAME – MIDDLE NAME :

LOPEZ, JAIME

MAILING ADDRESS :

5245 NW 112TH AVE APT 3

CITY : ZIP : COUNTY :

DORAL, FL 33178

NAME OF AGENCY :

FRONTERRA CDD, BOARD OF SUPERVISORS

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

ASSISTANT SECRETARY

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

FOR OFFICE USE ONLY:

9-21-21
Processed
265586

FD119356

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

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2020.

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
BARRON COLLIER COMPANIES	2600 GOLDEN GATE PARKWAY, NAPLES, FL	LAND DEV. / AGR. / MINERALS

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
N/A			

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

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
401 K	PRINCIPAL FINANCIAL GROUP

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
SUNCOAST FCU	TAMPA, FL

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")

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

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: 9/17/2021

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, 2020.

Florida Commission on Ethics
Financial Disclosure Notification System
Delinquency Certification (2021)

I Christina White, the Supervisor of Elections of Miami-Dade County, hereby certify that each person whose ID number, name, agency, and position appears above or on the attached list:

(1) was sent a notice of the July 1, 2021 financial disclosure deadline and a blank Form 1, Statement of Financial Interests, not later than June 1, 2021;

(2) was determined to be delinquent in filing a Form 1, Statement of Financial Interests, by July 1, 2021;

(3) was sent a delinquency notice by certified mail not later than August 1, 2021 advising him or her of the grace period in effect until September 1, 2021; and of the penalties that could be imposed as provided in Section 112.3145(8)(c), Florida Statutes; and

(4) did not file a Form 1, Statement of Financial Interests, until the date shown or, had not filed a Form 1, Statement of Financial Interests by October 31, 2021; and further

(5) that the date of filing shown is based upon the earliest of the following:
(a) when the Form 1 was actually received by my office;
(b) when the Form 1 was postmarked;
(c) when the certificate of mailing (if any) was dated; or
(d) when the receipt (if any) from an established courier company was dated.

Signed _____
SUPERVISOR OF ELECTIONS

Miami-Dade County Supervisor of Elections Financial Disclosure System 2021

You will be logged out after 29:57 minutes of inactivity.
Log Out

Print List

Miami-Dade County

Florida Commission on Ethics
Financial Disclosure Notification System
2021 Delinquency Certification
Reported 11/15/2021

This is a list of all delinquent Miami-Dade County filers. The date indicated in the "Form Receipt Date" column is the date the form was received. Any persons with no form receipt date indicated have not filed.

81	09/21/2021	265586	Jaime Lopez	Fronterra Community Development District	Assistant Secretary		23	Miami-Dade

I _____, the Supervisor of Elections of Miami-Dade County, hereby certify that each person whose PID number, name, agency, and position appears above or on the attached list:

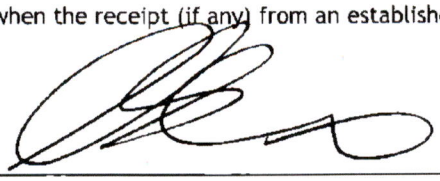
1. was sent a notice of the July 1, 2021 financial disclosure deadline and a blank Form 1, Statement of Financial Interests, not later than June 1, 2021;
2. was determined to be delinquent in filing a Form 1, Statement of Financial Interests, by July 1, 2021;
3. was sent a delinquency notice by certified mail not later than August 1, 2021 advising him or her of the grace period in effect until September 1, 2021; and of the penalties that could be imposed as provided in Section 112.3145(8)(c), Florida Statutes; and
4. did not file a Form 1, Statement of Financial Interests, until the date shown or, had not filed a Form 1, Statement of Financial Interests by October 31, 2021; and further
5. that the date of filing shown is based upon the earliest of the following:

a. when the Form 1 was actually received by my office;

b. when the Form 1 was postmarked;

c. when the certificate of mailing (if any) was dated; or

d. when the receipt (if any) from an established courier company was dated.

Signed 

SUPERVISOR OF ELECTIONS

Confirm Cancel

Miami Dade County Elections Department

Financial Disclosure Details

Tax Year	Name	FD#	ID#	Filing Status
2020	LOPEZ JAIME	FD119356	265586	Filed-Filed

Mailing Activity

Mail Date	Address Mailed to	Correspondence	Certified	Delivered	Tracking#
07/29/2021	5245 NW 112TH AVE APT 3, DORAL, FL 33178-3804	SECOND FINANCIAL DISCLOSURE MAILING	Y	Y	94148149022668493 52838

Filing Activity

Form Name	Filed Date	Valid	Comments	County	Date Filed in County
Form 1	09/24/2021	Y		MIAMI-DADE	

Communication

Miami Dade County Elections Department

Financial Disclosure Details

Tax Year	Name	FD#	ID#	Filing Status

Type	Date	Comments
Email	07/13/2021	From: Castellanos, Ramon (Elections) <Ramon.Castellanos2@miamidade.gov> Sent: Tuesday, July 13, 2021 9:26 AM To: Prine.Emily <PRINE.EMILY@leg.state.fl.us>; DominiqueShavontae <Shavontae.Dominique@colliervotes.gov> Cc: Castellanos, Ramon (Elections) <Ramon.Castellanos2@miamidade.gov> Subject: RE: Jaime Lopez Good morning, Could I please have MR. Lopez's Miami-Dade mailing address and any contact information you may have? The state record still shows his Naples address. Thank you. Regards, Ramon Castellanos, Records Custodian Government Affairs and Media Relations Division Miami-Dade County Elections Department 2700 NW 87th Avenue Miami, Florida 33172 Office 305-499-8541 http://www.miamidade.gov/elections "Delivering Excellence Every Day"
Email	07/12/2021	From: Prine.Emily <PRINE.EMILY@leg.state.fl.us> Sent: Monday, July 12, 2021 3:11 PM To: DominiqueShavontae <Shavontae.Dominique@colliervotes.gov> Cc: Castellanos, Ramon (Elections) <Ramon.Castellanos2@miamidade.gov> Subject: RE: Jaime Lopez EMAIL RECEIVED FROM EXTERNAL SOURCE Filer PID 265586 County has been changed.

Tax Year	Name	FD#	ID#	Filing Status

Sincerely,
Emily E. Prine
Program Specialist/Financial Disclosure
850-488-7864
Florida Commission on Ethics
Post Office Drawer 15709
Tallahassee, FL 32317-5709

From: DominiqueShavontae <Shavontae.Dominique@colliervotes.gov>
Sent: Monday, July 12, 2021 12:51 PM
To: disclosure <disclosure@leg.state.fl.us>
Subject: Jaime Lopez

Emily,

Can you please remove Jaime Lopez from Collier County filers list, he has moved to Miami-Dade County. Thanks!

Shavontae Dominique
Customer Service Representative
Jennifer J. Edwards
Supervisor of Elections
Rev Dr Martin Luther King Jr Building
3750 Enterprise Ave
Naples FL 34104
(239)252-8683
Our website has changed to: www.CollierVotes.gov
New email address: Shavontae.Dominique@Colliervotes.gov

Miami Dade County Elections Department

Financial Disclosure Details

Tax Year	Name	FD#	ID#	Filing Status

Email	07/13/2021	From: DominiqueShavontae <Shavontae.Dominique@colliervotes.gov> Sent: Tuesday, July 13, 2021 9:45 AM To: Castellanos, Ramon (Elections) <Ramon.Castellanos2@miamidade.gov> Subject: RE: Jaime Lopez EMAIL RECEIVED FROM EXTERNAL SOURCE Morning, Jaime Lopez with date of birth of 9/23/83 shows 5245 NW 112th Ave Apt 3, Doral FL 33178 Kind Regards, Shavontae Dominique Customer Service Representative Jennifer J. Edwards Supervisor of Elections Rev Dr Martin Luther King Jr Building 3750 Enterprise Ave Naples FL 34104 (239)252-8683
Quality Assurance	07/13/2021	ADDRESS CHANGED FROM 4680 SAINT CROIX LN APT 528, NAPLES FL 34109-3564 TO 5245 NW 112TH AVE APT 3, DORAL FL 33178-3804.
Email	09/21/2021	From: Prine.Emily <PRINE.EMILY@leg.state.fl.us> Sent: Tuesday, September 21, 2021 1:50 PM To: Jaime Lopez <JLopez@barroncollier.com> Cc: Russ Weyer <Rweyer@ree-i.com>; Castellanos, Ramon (Elections) <Ramon.Castellanos2@miamidade.gov> Subject: RE: Form 2020i EMAIL RECEIVED FROM EXTERNAL SOURCE Thank you! Form has been recorded.

Tax Year	Name	FD#	ID#	Filing Status

I will forward stamped copy to Miami-Dade Supervisor of Elections once we complete our process.

Sincerely,
Emily E. Prine
Program Specialist/Financial Disclosure
850-488-7864
Florida Commission on Ethics
Post Office Drawer 15709
Tallahassee, FL 32317-5709

From: Jaime Lopez <JLopez@barroncollier.com>
Sent: Tuesday, September 21, 2021 1:47 PM
To: Prine.Emily <PRINE.EMILY@leg.state.fl.us>
Cc: Russ Weyer <Rweyer@ree-i.com>
Subject: Form 2020i

Good afternoon Emily,

Per your conversation with Russ Weyer, I have attached my completed Form 2020i. Please let me know if you need anything else.

Thank you for your assistance.

Sincerely,

Jaime Lopez

Miami Dade County Elections Department

Financial Disclosure Details

Tax Year	Name	FD#	ID#	Filing Status
Email	09/24/2021	From: Prine.Emily <PRINE.EMILY@leg.state.fl.us> Sent: Friday, September 24, 2021 8:23 AM To: Financial Disclosures (Elections) <FINDISCELEC@miamidade.gov> Subject: Recorded PID 265586		

Elections
Supervisor of Elections Financial Disclosure Section
PO Box 521550
Miami Florida 33152-1550
ADDRESS SERVICE REQUESTED

IMPORTANT:
YOUR ANNUAL DISCLOSURE FORM IS ENCLOSED AND MUST BE FILED BY SEPT. 1, 2021

USPS CERTIFIED MAIL



9414 8149 0226 6849 3528 38



FD119356

JAIME LOPEZ
5245 NW 112TH AVE APT 3
DORAL, FL 33178

Memorandum

MIAMI-DADE COUNTY

To: Local Officer

From: Christina White
Supervisor of Elections

Subject: Notice of Delinquency - Financial Disclosure Filing Requirement for the 2020 Tax Year

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The position you held in 2020 was determined to be one that requires the filing of a financial disclosure form. Our records indicate that you were mailed a financial disclosure notice at the end of May, advising you that per Florida Statute 112.3145, you were required to file a Form 1, Statement of Financial Interests with our office by July 1, 2021. To date, we have not received the required form from you.

Pursuant to State law, I am writing to notify you that although you are delinquent in filing your financial disclosure form with our office, **a grace period is in effect until Wednesday, September 1, 2021 to file your signed and dated Form 1 for the 2020 tax year with our office**.

If your Form 1 is not received by September 1, 2021, a fine of $25 for each day late will be imposed, up to a maximum penalty of $1,500. In addition, I will be required by law to notify the State of Florida Commission on Ethics of the delinquency. In addition, pursuant to enacted legislation, the Commission on Ethics must initiate investigations of delinquent filers, in certain circumstances. This can result in your removal from public office or employment. See Section 112.3145(8)(c), Florida Statues.

Please note that persons serving as of December 31, 2020 are required to file this year. If you left the position in 2020, you are required to file a Form 1F 2020 covering the portion of 2020 you served. If you left the position in 2021, you are required to file a Form 1 for 2020 and a Form 1F 2021 for the portion of 2021 you served. Also, if your home address is exempt from public records, please provide your office address or other mailing address. Instructions for completing this form are included and additional questions on how to complete this form should be directed to the State of Florida Commission on Ethics at 850-488-7864.

The Elections Department is the records custodian for these forms. As such, please send your **completed, signed and dated financial disclosure statement** via email to financial.disclosures@miamidade.gov so long as it is a legible scanned copy, or by returning it to the Miami-Dade County Supervisor of Elections, Financial Disclosure Section, PO Box 521550, Miami, Florida 33152. A business reply envelope has been provided for your convenience. The form may also be hand delivered. **Please do not file this form with the Florida Commission on Ethics in Tallahassee.** If you filed directly with the Florida Commission on Ethics, please provide us a copy.

You can check receipt of your financial disclosure form on the Miami-Dade Elections Department website at www.miamidade.gov/elections/disclosure. In the event that you already filed your financial disclosure form with the Miami-Dade County Elections Department, please contact our office immediately so that we may review our records and remove your name from the delinquency list, if applicable.

If you have any questions or need additional information, please contact Maria Boucourt, Miami-Dade Financial Disclosure Coordinator, at 305-499-8413 or via email at financial.disclosures@miamidade.gov.

If you think you have received this in error, please contact the coordinator for your agency who has provided your name based on your official position and responsibilities. If appropriate, the local agency's coordinator will contact the Florida Commission on Ethics to remove your name from the list. To find your coordinator, you can contact Maria Boucourt at the number above or view the coordinator list provided on the Commission on Ethics' website at http://www.ethics.state.fl.us.

Enclosures

FORM 1 — STATEMENT OF FINANCIAL INTERESTS — 2020

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

LAST NAME -- FIRST NAME -- MIDDLE NAME :

LOPEZ, JAIME

MAILING ADDRESS :

5245 NW 112TH AVE APT 3

CITY : ZIP : COUNTY :

DORAL, FL 33178

NAME OF AGENCY :

FRONTERRA CDD, BOARD OF SUPERVISORS

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

ASSISTANT SECRETARY

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

FOR OFFICE USE ONLY:

FD119356

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

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2020.

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

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

NAME OF CREDITOR	ADDRESS OF CREDITOR

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")

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
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 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:

_____

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, 2020.

NOTICE

Annual Statements of Financial Interests are due July 1. If the annual form is not filed or postmarked by September 1, an automatic fine of $25 for each day late will be imposed, up to a maximum penalty of $1,500. Failure to file also can result in removal from public office or employment. [s. 112.3145, F.S.]

In addition, failure to make any required disclosure constitutes grounds for and may be punished by one or more of the following: disqualification from being on the ballot, impeachment, removal or suspension from office or employment, demotion, reduction in salary, reprimand, or a civil penalty not exceeding $10,000. [s. 112.317, F.S.]

WHO MUST FILE FORM 1:

1) Elected public officials not serving in a political subdivision of the state and any person appointed to fill a vacancy in such office, unless required to file full disclosure on Form 6.

2) Appointed members of each board, commission, authority, or council having statewide jurisdiction, excluding members of solely advisory bodies, but including judicial nominating commission members; Directors of Enterprise Florida, Scripps Florida Funding Corporation, and Career Source Florida; and members of the Council on the Social Status of Black Men and Boys; the Executive Director, Governors, and senior managers of Citizens Property Insurance Corporation; Governors and senior managers of Florida Workers' Compensation Joint Underwriting Association; board members of the Northeast Fla. Regional Transportation Commission; board members of Triumph Gulf Coast, Inc; board members of Florida Is For Veterans, Inc.; and members of the Technology Advisory Council within the Agency for State Technology.

3) The Commissioner of Education, members of the State Board of Education, the Board of Governors, the local Boards of Trustees and Presidents of state universities, and the Florida Prepaid College Board.

4) Persons elected to office in any political subdivision (such as municipalities, counties, and special districts) and any person appointed to fill a vacancy in such office, unless required to file Form 6.

5) Appointed members of the following boards, councils, commissions, authorities, or other bodies of county, municipality, school district, independent special district, or other political subdivision: the governing body of the subdivision; community college or junior college district boards of trustees; boards having the power to enforce local code provisions; boards of adjustment; community redevelopment agencies; planning or zoning boards having the power to recommend, create, or modify land planning or zoning within a political subdivision, except for citizen advisory committees, technical coordinating committees, and similar groups who only have the power to make recommendations to planning or zoning boards, and except for representatives of a military installation acting on behalf of all military installations within that jurisdiction; pension or retirement boards empowered to invest pension or retirement funds or determine entitlement to or amount of pensions or other retirement benefits, and the Pinellas County Construction Licensing Board.

6) Any appointed member of a local government board who is required to file a statement of financial interests by the appointing authority or the enabling legislation, ordinance, or resolution creating the board.

7) Persons holding any of these positions in local government: mayor; county or city manager; chief administrative employee or finance director of a county, municipality, or other political subdivision; county or municipal attorney; chief county or municipal building inspector; county or municipal water resources coordinator; county or municipal pollution control director; county or municipal environmental control director; county or municipal administrator with power to grant or deny a land development permit; chief of police; fire chief; municipal clerk; appointed district school superintendent; community college president; district medical examiner; purchasing agent (regardless of title) having the authority to make any purchase exceeding $35,000 for the local governmental unit.

8) Officers and employees of entities serving as chief administrative officer of a political subdivision.

9) Members of governing boards of charter schools operated by a city or other public entity.

10) Employees in the office of the Governor or of a Cabinet member who are exempt from the Career Service System, excluding secretarial, clerical, and similar positions.

11) The following positions in each state department, commission, board, or council: Secretary, Assistant or Deputy Secretary, Executive Director, Assistant or Deputy Executive Director, and anyone having the power normally conferred upon such persons, regardless of title.

12) The following positions in each state department or division: Director, Assistant or Deputy Director, Bureau Chief, and any person having the power normally conferred upon such persons, regardless of title.

13) Assistant State Attorneys, Assistant Public Defenders, criminal conflict and civil regional counsel, and assistant criminal conflict and civil regional counsel, Public Counsel, full-time state employees serving as counsel or assistant counsel to a state agency, administrative law judges, and hearing officers.

14) The Superintendent or Director of a state mental health institute established for training and research in the mental health field, or any major state institution or facility established for corrections, training, treatment, or rehabilitation.

15) State agency Business Managers, Finance and Accounting Directors, Personnel Officers, Grant Coordinators, and purchasing agents (regardless of title) with power to make a purchase exceeding $35,000.

16) The following positions in legislative branch agencies: each employee (other than those employed in maintenance, clerical, secretarial, or similar positions and legislative assistants exempted by the presiding officer of their house); and each employee of the Commission on Ethics.

INSTRUCTIONS FOR COMPLETING FORM 1:

INTRODUCTORY INFORMATION (Top of Form): If your name, mailing address, public agency, and position are already printed on the form, you do not need to provide this information unless it should be changed. To change any of this information, write the correct information on the form, and contact your agency's financial disclosure coordinator. You can find your coordinator on the Commission on Ethics website: www.ethics.state.fl.us.

NAME OF AGENCY: The name of the governmental unit which you serve or served, by which you are or were employed, or for which you are a candidate.

DISCLOSURE PERIOD: The "disclosure period" for your report is the calendar year ending December 31, 2020.

OFFICE OR POSITION HELD OR SOUGHT: The title of the office or position you hold, are seeking, or held during the disclosure period even if you have since left that position. If you are a candidate for office or are a new employee or appointee, check the appropriate box.

PUBLIC RECORD: The disclosure form and everything attached to it is a public record. Your Social Security Number is not required and you should redact it from any documents you file. If you are an active or former officer or employee listed in Section 119.071, F.S., whose home address is exempt from disclosure, the Commission will maintain that confidentiality if you submit a written request.

MANNER OF CALCULATING REPORTABLE INTEREST

Filers have the option of reporting based on either thresholds that are comparative (usually, based on percentage values) or thresholds that are based on absolute dollar values. The instructions on the following pages specifically describe the different thresholds. Check the box that reflects the choice you have made. You must use the type of threshold you have chosen for each part of the form. In other words, if you choose to report based on absolute dollar value thresholds, you cannot use a percentage threshold on any part of the form.

IF YOU HAVE CHOSEN DOLLAR VALUE THRESHOLDS THE FOLLOWING INSTRUCTIONS APPLY

PART A — PRIMARY SOURCES OF INCOME

[Required by s. 112.3145(3)(b)1, F.S.]

Part A is intended to require the disclosure of your principal sources of income during the disclosure period. You do not have to disclose any public salary or public position(s). The income of your spouse need not be disclosed; however, if there is joint income to you and your spouse from property you own jointly (such as interest or dividends from a bank account or stocks), you should disclose the source of that income if it exceeded the threshold.

Please list in this part of the form the name, address, and principal business activity of each source of your income which exceeded $2,500 of gross income received by you in your own name or by any other person for your use or benefit.

"Gross income" means the same as it does for income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, social security, distributive share of partnership gross income, and alimony, but not child support.

Examples:

— If you were employed by a company that manufactures computers and received more than $2,500, list the name of the company, its address, and its principal business activity (computer manufacturing).

— If you were a partner in a law firm and your distributive share of partnership gross income exceeded $2,500, list the name of the firm, its address, and its principal business activity (practice of law).

— If you were the sole proprietor of a retail gift business and your gross income from the business exceeded $2,500, list the name of the business, its address, and its principal business activity (retail gift sales).

— If you received income from investments in stocks and bonds, list each individual company from which you derived more than $2,500. Do not aggregate all of your investment income.

— If more than $2,500 of your gross income was gain from the sale of property (not just the selling price), list as a source of income the purchaser's name, address and principal business activity. If the purchaser's identity is unknown, such as where securities listed on an exchange are sold through a brokerage firm, the source of income should be listed as "sale of (name of company) stock," for example.

— If more than $2,500 of your gross income was in the form of interest from one particular financial institution (aggregating interest from all CD's, accounts, etc., at that institution), list the name of the institution, its address, and its principal business activity.

PART B — SECONDARY SOURCES OF INCOME

[Required by s. 112.3145(3)(b)2, F.S.]

This part is intended to require the disclosure of major customers, clients, and other sources of income to businesses in which you own an interest. It is not for reporting income from second jobs. That kind of income should be reported in Part A "Primary Sources of Income," if it meets the reporting threshold. You will not have anything to report unless, during the disclosure period:

(1) You owned (either directly or indirectly in the form of an equitable or beneficial interest) more than 5% of the total assets or capital stock of a business entity (a corporation, partnership, LLC, limited partnership, proprietorship, joint venture, trust, firm, etc., doing business in Florida); ***and,***

(2) You received more than $5,000 of your gross income during the disclosure period from that business entity.

If your interests and gross income exceeded these thresholds, then for that business entity you must list every source of income to the business entity which exceeded 10% of the business entity's gross income (computed on the basis of the business entity's most recently completed fiscal year), the source's address, and the source's principal business activity.

Examples:

— You are the sole proprietor of a dry cleaning business, from which you received more than $5,000. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of the uniform rental company, its address, and its principal business activity (uniform rentals).

— You are a 20% partner in a partnership that owns a shopping mall and your partnership income exceeded the above thresholds. List each tenant of the mall that provided more than 10% of the partnership's gross income and the tenant's address and principal business activity.

PART C — REAL PROPERTY

[Required by s. 112.3145(3)(b)3, F.S.]

In this part, list the location or description of all real property in Florida in which you owned directly or indirectly at any time during the disclosure period in excess of 5% of the property's value. You are not required to list your residences. You should list any vacation homes if you derive income from them.

Indirect ownership includes situations where you are a beneficiary of a trust that owns the property, as well as situations where you own more than 5% of a partnership or corporation that owns the property. The value of the property may be determined by the most recently assessed value for tax purposes, in the absence of a more accurate fair market value.

The location or description of the property should be sufficient to enable anyone who looks at the form to identify the property. A street address should be used, if one exists.

PART D — INTANGIBLE PERSONAL PROPERTY

[Required by s. 112.3145(3)(b)3, F.S.]

Describe any intangible personal property that, at any time during the disclosure period, was worth more than $10,000 and state the business entity to which the property related. Intangible personal property includes things such as cash on hand, stocks, bonds, certificates of deposit, vehicle leases, interests in businesses, beneficial interests in trusts, money owed you (including, but not limited to, loans made as a candidate to your own campaign), Deferred Retirement Option Program (DROP) accounts, the Florida Prepaid College Plan, and bank accounts in which you have an ownership interest. Intangible personal property also includes investment products held in IRAs, brokerage accounts, and the Florida College Investment Plan. Note that the product *contained in* a brokerage account, IRA, or the Florida College Investment Plan is your asset—not the account or plan itself. Things like automobiles and houses you own, jewelry, and paintings are not intangible property. Intangibles relating to the same business entity may be aggregated; for example, CDs and savings accounts with the same bank. Property owned as tenants by the entirety or as joint tenants with right of survivorship, including bank accounts owned in such a manner, should be valued at 100%. The value of a leased vehicle is the vehicle's present value minus the lease residual (a number found on the lease document).

PART E — LIABILITIES

[Required by s. 112.3145(3)(b)4, F.S.]

List the name and address of each creditor to whom you owed more than $10,000 at any time during the disclosure period. The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments. You are not required to list the amount of any debt. You do not have to disclose credit card and retail installment accounts, taxes owed (unless reduced to a judgment), indebtedness on a life insurance policy owed to the company of issuance, or contingent liabilities. A "contingent liability" is one that will become an actual liability only when one or more future events occur or fail to occur, such as where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" and are jointly liable or jointly and severally liable, then it is not a contingent liability.

PART F — INTERESTS IN SPECIFIED BUSINESSES

[Required by s. 112.3145(6), F.S.]

The types of businesses covered in this disclosure include: state and federally chartered banks; state and federal savings and loan associations; cemetery companies; insurance companies; mortgage companies; credit unions; small loan companies; alcoholic beverage licensees; pari-mutuel wagering companies, utility companies, entities controlled by the Public Service Commission; and entities granted a franchise to operate by either a city or a county government.

Disclose in this part the fact that you owned during the disclosure period an interest in, or held any of certain positions with the types of businesses listed above. You must make this disclosure if you own or owned (either directly or indirectly in the form of an equitable or beneficial interest) at any time during the disclosure period more than 5% of the total assets or capital stock of one of the types of business entities listed above. You also must complete this part of the form for each of these types of businesses for which you are, or were at any time during the disclosure period, an officer, director, partner, proprietor, or agent (other than a resident agent solely for service of process).

If you have or held such a position or ownership interest in one of these types of businesses, list the name of the business, its address and principal business activity, and the position held with the business (if any). If you own(ed) more than a 5% interest in the business, indicate that fact and describe the nature of your interest.

PART G — TRAINING CERTIFICATION

[Required by s. 112.3142, F.S.]

If you are a Constitutional or elected municipal officer, appointed school superintendent, or a commissioner of a community redevelopment agency created under Part III, Chapter 163 whose service began before March 31 of the year for which you are filing, you are required to complete four hours of ethics training which addresses Article II, Section 8 of the Florida Constitution, the Code of Ethics for Public Officers and Employees, and the public records and open meetings laws of the state. You are required to certify on this form that you have taken such training.

IF YOU HAVE CHOSEN COMPARATIVE (PERCENTAGE) THRESHOLDS THE FOLLOWING INSTRUCTIONS APPLY

PART A — PRIMARY SOURCES OF INCOME

[Required by s. 112.3145(3)(a)1, F.S.]

Part A is intended to require the disclosure of your principal sources of income during the disclosure period. You do not have to disclose any public salary or public position(s), but income from these public sources should be included when calculating your gross income for the disclosure period. The income of your spouse need not be disclosed; however, if there is joint income to you and your spouse from property you own jointly (such as interest or dividends from a bank account or stocks), you should include all of that income when calculating your gross income and disclose the source of that income if it exceeded the threshold.

Please list in this part of the form the name, address, and principal business activity of each source of your income which exceeded 5% of the gross income received by you in your own name or by any other person for your benefit or use during the disclosure period.

"Gross income" means the same as it does for income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples include: compensation for services, income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, social security, distributive share of partnership gross income, and alimony, but not child support.

Examples:

— If you were employed by a company that manufactures computers and received more than 5% of your gross income from the company, list the name of the company, its address, and its principal business activity (computer manufacturing).

— If you were a partner in a law firm and your distributive share of partnership gross income exceeded 5% of your gross income, then list the name of the firm, its address, and its principal business activity (practice of law).

— If you were the sole proprietor of a retail gift business and your gross income from the business exceeded 5% of your total gross income, list the name of the business, its address, and its principal business activity (retail gift sales).

— If you received income from investments in stocks and bonds, list each individual company from which you derived more than 5% of your gross income. Do not aggregate all of your investment income.

— If more than 5% of your gross income was gain from the sale of property (not just the selling price), list as a source of income the purchaser's name, address, and principal business activity. If the purchaser's identity is unknown, such as where securities listed on an exchange are sold through a brokerage firm, the source of income should be listed as "sale of (name of company) stock," for example.

— If more than 5% of your gross income was in the form of interest from one particular financial institution (aggregating interest from all CD's, accounts, etc., at that institution), list the name of the institution, its address, and its principal business activity.

PART B — SECONDARY SOURCES OF INCOME

[Required by s. 112.3145(3)(a)2, F.S.]

This part is intended to require the disclosure of major customers, clients, and other sources of income to businesses in which you own an interest. It is not for reporting income from second jobs. That kind of income should be reported in Part A, "Primary Sources of Income," if it meets the reporting threshold. You will ***not*** have anything to report ***unless*** during the disclosure period:

(1) You owned (either directly or indirectly in the form of an equitable or beneficial interest) more than 5% of the total assets or capital stock of a business entity (a corporation, partnership, LLC, limited partnership, proprietorship, joint venture, trust, firm, etc., doing business in Florida); ***and,***

(2) You received more than 10% of your gross income from that business entity; ***and,***

(3) You received more than $1,500 in gross income from that business entity.

If your interests and gross income exceeded these thresholds, then for that business entity you must list every source of income to the business entity which exceeded 10% of the business entity's gross income (computed on the basis of the business entity's most recently completed fiscal year), the source's address, and the source's principal business activity.

Examples:

— You are the sole proprietor of a dry cleaning business, from which you received more than 10% of your gross income—an amount that was more than $1,500. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of the uniform rental company, its address, and its principal business activity (uniform rentals).

— You are a 20% partner in a partnership that owns a shopping mall and your partnership income exceeded the thresholds listed above. You should list each tenant of the mall that provided more than 10% of the partnership's gross income, and the tenant's address and principal business activity.

PART C — REAL PROPERTY

[Required by s. 112.3145(3)(a)3, F.S.]

In this part, list the location or description of all real property in Florida in which you owned directly or indirectly at any time during the disclosure period in excess of 5% of the property's value. You are not required to list your residences. You should list any vacation homes, if you derive income from them.

Indirect ownership includes situations where you are a beneficiary of a trust that owns the property, as well as situations where you own more than 5% of a partnership or corporation that owns the property. The value of the property may be determined by the most recently assessed value for tax purposes, in the absence of a more accurate fair market value.

The location or description of the property should be sufficient to enable anyone who looks at the form to identify the property. A street address should be used, if one exists.

PART D — INTANGIBLE PERSONAL PROPERTY

[Required by s. 112.3145(3)(a)3, F.S.]

Describe any intangible personal property that, at any time during the disclosure period, was worth more than 10% of your total assets, and state the business entity to which the property related. Intangible personal property includes things such as cash on hand, stocks, bonds, certificates of deposit, vehicle leases, interests in businesses, beneficial interests in trusts, money owed you (including, but not limited to, loans made as a candidate to your own campaign), Deferred Retirement Option Program (DROP) accounts, the Florida Prepaid College Plan, and bank accounts in which you have an ownership interest. Intangible personal property also includes investment products held in IRAs, brokerage accounts, and the Florida College Investment Plan. Note that the product *contained in* a brokerage account, IRA, or the Florida College Investment Plan is your asset—not the account or plan itself. Things like automobiles and houses you own, jewelry, and paintings are not intangible property. Intangibles relating to the same business entity may be aggregated; for example, CD's and savings accounts with the same bank.

Calculations: To determine whether the intangible property exceeds 10% of your total assets, total the fair market value of all of your assets (including real property, intangible property, and tangible personal property such as jewelry, furniture, etc.). When making this calculation, do not subtract any liabilities (debts) that may relate to the property. Multiply the total figure by 10% to arrive at the disclosure threshold. List only the intangibles that exceed this threshold amount. The value of a leased vehicle is the vehicle's present value minus the lease residual (a number which can be found on the lease document). Property that is only jointly owned property should be valued according to the percentage of your joint ownership. Property owned as tenants by the entirety or as joint tenants with right of survivorship, including bank accounts owned in such a manner, should be valued at 100%. None of your calculations or the value of the property have to be disclosed on the form.

Example: You own 50% of the stock of a small corporation that is worth $100,000, the estimated fair market value of your home and other property (bank accounts, automobile, furniture, etc.) is $200,000. As your total assets are worth $250,000, you must disclose intangibles worth over $25,000. Since the value of the stock exceeds this threshold, you should list "stock" and the name of the corporation. If your accounts with a particular bank exceed $25,000, you should list "bank accounts" and bank's name.

PART E — LIABILITIES

[Required by s. 112.3145(3)(b)4, F.S.]

List the name and address of each creditor to whom you owed any amount that, at any time during the disclosure period, exceeded your net worth. You are not required to list the amount of any debt or your net worth. You do not have to disclose: credit card and retail installment accounts, taxes owed (unless reduced to a judgment), indebtedness on a life insurance policy owed to the company of issuance, or contingent liabilities. A "contingent liability" is one that will become an actual liability only when one or more future events occur or fail to occur, such as where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" and are jointly liable or jointly and severally liable, it is not a contingent liability.

Calculations: To determine whether the debt exceeds your net worth, total all of your liabilities (including promissory notes, mortgages, credit card debts, judgments against you, etc.). The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments. Subtract the sum total of your liabilities from the value of all your assets as calculated above for Part D. This is your "net worth." List each creditor to whom your debt exceeded this amount unless it is one of the types of indebtedness listed in the paragraph above (credit card and retail installment accounts, etc.). Joint liabilities with others for which you are "jointly and severally liable," meaning that you may be liable for either your part or the whole of the obligation, should be included in your calculations at 100% of the amount owed.

Example: You owe $15,000 to a bank for student loans, $5,000 for credit card debts, and $60,000 (with spouse) to a savings and loan for a home mortgage. Your home (owned by you and your spouse) is worth $80,000 and your other property is worth $20,000. Since your net worth is $20,000 ($100,000 minus $80,000), you must report only the name and address of the savings and loan.

PART F — INTERESTS IN SPECIFIED BUSINESSES

[Required by s. 112.3145, F.S.]

The types of businesses covered in this disclosure include: state and federally chartered banks; state and federal savings and loan associations; cemetery companies; insurance companies; mortgage companies; credit unions; small loan companies; alcoholic beverage licensees; pari-mutuel wagering companies, utility companies, entities controlled by the Public Service Commission; and entities granted a franchise to operate by either a city or a county government.

Disclose in this part the fact that you owned during the disclosure period an interest in, or held any of certain positions with, the types of businesses listed above. You are required to make this disclosure if you own or owned (either directly or indirectly in the form of an equitable or beneficial interest) at any time during the disclosure period more than 5% of the total assets or capital stock of one of the types of business entities listed above. You also must complete this part of the form for each of these types of businesses for which you are, or were at any time during the disclosure period, an officer, director, partner, proprietor, or agent (other than a resident agent solely for service of process).

If you have or held such a position or ownership interest in one of these types of businesses, list the name of the business, its address and principal business activity, and the position held with the business (if any). If you own(ed) more than a 5% interest in the business, indicate that fact and describe the nature of your interest.

PART G — TRAINING CERTIFICATION

[Required by s. 112.3142, F.S.]

If you are a Constitutional or elected municipal officer, appointed school superintendent, or a commissioner of a community redevelopment agency created under Part III, Chapter 163 whose service began before March 31 of the year for which you are filing, you are required to complete four hours of ethics training which addresses Article II, Section 8 of the Florida Constitution, the Code of Ethics for Public Officers and Employees, and the public records and open meetings laws of the state. You are required to certify on this form that you have taken such training.

. . . IMPORTANT . . . IMPORTANT . . . IMPORTANT . . .

Form 1 Filers

FORMS MUST BE FILED OR POSTMARKED BY SEPTEMBER 1

Filing late may result in automatic fines of $25 per day!
Failure to pay fines may result in salary withholding, wage garnishment, or removal from office or employment!

* * *

Read the Instructions

The Commission does not review forms for accuracy, and a complaint can be filed against you for failing to properly make a required disclosure.

* * *

Manner of Calculating Reportable Interest

You have 2 options – Comparative (Percentage) Threshold or Dollar Value Threshold.
The instructions describe each option in detail.
You must choose one and check the box that reflects your choice.

* * *

Elected Municipal Officers

Elected municipal officers and commissioners of a community redevelopment agency (created under Part III, Chapter 163) are required to complete 4 hours of ethics training each calendar year. Compliance with the training requirement must be reported on the Form 1. Elected members of a special district are not municipal officers subject to the training requirement. Report your compliance for the form year by checking the box in Part G. For more ethics training information, visit the training page on the Commission's website.

* * *

Your Disclosure is a Public Record

Do NOT put social security, bank account or credit card numbers on your Form 1.
If your home address or other information is exempt from disclosure under Section 119.071, F.S., and you want us to keep it confidential, you must submit a written request as required by Section 119.071. If you previously filed a confidentiality request with our office, you do not need to file another request this year.



Questions?

Visit our website: www.ethics.state.fl.us

Under the "Financial Disclosure" tab you can find information about your specific filing requirement, coordinator contact information, where to file, and the ability to confirm that your form has been received (please allow five business days from the date you mailed the form). Helpful general information and summaries of the Commission's most significant opinions dealing with financial disclosure can also be found here.

Contact us!

(850) 488-7864 or email: disclosure@leg.state.fl.us

UNITED STATES POSTAL SERVICE

Date Produced: 08/09/2021

MIAMI-DADE COUNTY:

The following is the delivery information for Certified Mail™/RRE item number 9414 8149 0226 6849 3528 38. Our records indicate that this item was delivered on 08/02/2021 at 04:46 p.m. in MIAMI, FL 33178. The scanned image of the recipient information is provided below.

Signature of Recipient :

Address of Recipient :

Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local post office or Postal Service representative.

Sincerely,
United States Postal Service

The customer reference number shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

Customer Reference Number: ELESTATEz3zFD119356

USPS Tracking®

FAQs >

Track Another Package +

Tracking Number: 9414814902266849352838

Remove ×

Your item was delivered to an individual at the address at 4:46 pm on August 2, 2021 in MIAMI, FL 33178.

Delivered, Left with Individual

August 2, 2021 at 4:46 pm
MIAMI, FL 33178

Get Updates ∨

Text & Email Updates ∨

Return Receipt Electronic ∨

Tracking History ∧

August 2, 2021, 4:46 pm
Delivered, Left with Individual
MIAMI, FL 33178
Your item was delivered to an individual at the address at 4:46 pm on August 2, 2021 in MIAMI, FL 33178.

August 1, 2021, 9:40 am
Departed USPS Regional Facility
OPA LOCKA FL DISTRIBUTION CENTER

July 31, 2021, 6:18 am
Arrived at USPS Regional Facility
OPA LOCKA FL DISTRIBUTION CENTER

July 31, 2021, 5:03 am
Accepted at USPS Origin Facility
MIAMI, FL 33128

July 23, 2021
Pre-Shipment Info Sent to USPS, USPS Awaiting Item

Product Information

See Less ^

Can't find what you're looking for?

Go to our FAQs section to find answers to your tracking questions.

FAQs

From: Castellanos, Ramon (Elections)
To: DominiqueShavontae
Cc: Financial Disclosures (Elections); Castellanos, Ramon (Elections)
Subject: RE: Jaime Lopez
Date: Tuesday, July 13, 2021 9:50:31 AM
Attachments: image002.png
image003.png
image004.png

Good morning. Thank you for the updated address.

Regards,

Ramon Castellanos, Records Custodian
Government Affairs and Media Relations Division
Miami-Dade County Elections Department
2700 NW 87th Avenue
Miami, Florida 33172
Office 305-499-8541
http://www.miamidade.gov/elections
"Delivering Excellence Every Day"





Miami-Dade County is a public entity subject to Chapter 119 of the Florida Statutes concerning public records. Email messages are covered under such laws and thus subject to disclosure.

From: DominiqueShavontae <Shavontae.Dominique@colliervotes.gov>
Sent: Tuesday, July 13, 2021 9:45 AM
To: Castellanos, Ramon (Elections) <Ramon.Castellanos2@miamidade.gov>
Subject: RE: Jaime Lopez

EMAIL RECEIVED FROM EXTERNAL SOURCE

Morning,

Jaime Lopez with date of birth of 9/23/83 shows 5245 NW 112th Ave Apt 3, Doral FL 33178

Kind Regards,
Shavontae Dominique
Customer Service Representative

Jennifer J. Edwards
Supervisor of Elections

Rev Dr Martin Luther King Jr Building
3750 Enterprise Ave
Naples FL 34104
(239)252-8683
Our website has changed to: www.CollierVotes.gov
New email address: Shavontae.Dominique@Colliervotes.gov

From: Castellanos, Ramon (Elections) <Ramon.Castellanos2@miamidade.gov>
Sent: Tuesday, July 13, 2021 9:26 AM
To: Prine.Emily <PRINE.EMILY@leg.state.fl.us>; DominiqueShavontae <Shavontae.Dominique@colliervotes.gov>
Cc: Castellanos, Ramon (Elections) <Ramon.Castellanos2@miamidade.gov>
Subject: RE: Jaime Lopez

EXTERNAL EMAIL: This email is from an external source. Confirm this is a trusted sender and use extreme caution when opening attachments or clicking links.

Good morning,

Could I please have MR. Lopez's Miami-Dade mailing address and any contact information you may have? The state record still shows his Naples address. Thank you.

Regards,

Ramon Castellanos, Records Custodian
Government Affairs and Media Relations Division
Miami-Dade County Elections Department
2700 NW 87th Avenue
Miami, Florida 33172
Office 305-499-8541
http://www.miamidade.gov/elections
"Delivering Excellence Every Day"





Miami-Dade County is a public entity subject to Chapter 119 of the Florida Statutes concerning public records. Email messages are covered under such laws and thus subject to disclosure.

From: Prine.Emily <PRINE.EMILY@leg.state.fl.us>

Sent: Monday, July 12, 2021 3:11 PM
To: DominiqueShavontae <Shavontae.Dominique@colliervotes.gov>
Cc: Castellanos, Ramon (Elections) <Ramon.Castellanos2@miamidade.gov>
Subject: RE: Jaime Lopez

EMAIL RECEIVED FROM EXTERNAL SOURCE

Filer PID 265586

County has been changed.

Sincerely,
Emily E. Prine
Program Specialist/Financial Disclosure
850-488-7864
Florida Commission on Ethics
Post Office Drawer 15709
Tallahassee, FL 32317-5709

From: DominiqueShavontae <Shavontae.Dominique@colliervotes.gov>
Sent: Monday, July 12, 2021 12:51 PM
To: disclosure <disclosure@leg.state.fl.us>
Subject: Jaime Lopez

Emily,

Can you please remove Jaime Lopez from Collier County filers list, he has moved to Miami-Dade County. Thanks!

Shavontae Dominique
Customer Service Representative

Jennifer J. Edwards
Supervisor of Elections
Rev Dr Martin Luther King Jr Building
3750 Enterprise Ave
Naples FL 34104
(239)252-8683
Our website has changed to: www.CollierVotes.gov
New email address: Shavontae.Dominique@Colliervotes.gov

Under Florida Law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public records request, do not send electronic mail to this entity. Instead, contact this office by telephone or in writing.

From: Prine.Emily
To: Jaime Lopez
Cc: Russ Weyer; Castellanos, Ramon (Elections)
Subject: RE: Form 2020i
Date: Tuesday, September 21, 2021 1:50:24 PM

EMAIL RECEIVED FROM EXTERNAL SOURCE

Thank you! Form has been recorded.

I will forward stamped copy to Miami-Dade Supervisor of Elections once we complete our process.

Sincerely,
Emily E. Prine
Program Specialist/Financial Disclosure
850-488-7864
Florida Commission on Ethics
Post Office Drawer 15709
Tallahassee, FL 32317-5709

From: Jaime Lopez <JLopez@barroncollier.com>
Sent: Tuesday, September 21, 2021 1:47 PM
To: Prine.Emily <PRINE.EMILY@leg.state.fl.us>
Cc: Russ Weyer <Rweyer@ree-i.com>
Subject: Form 2020i

Good afternoon Emily,

Per your conversation with Russ Weyer, I have attached my completed Form 2020i. Please let me know if you need anything else.

Thank you for your assistance.

Sincerely,

Jaime Lopez

From: Prine.Emily
To: Financial Disclosures (Elections)
Subject: Recorded PID 265586
Date: Friday, September 24, 2021 8:23:23 AM
Attachments: Lopez Jaime.pdf

EMAIL RECEIVED FROM EXTERNAL SOURCE

FD119356

FORM 1 STATEMENT OF FINANCIAL INTERESTS 2020

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

LAST NAME – FIRST NAME – MIDDLE NAME:
LOPEZ, JAIME

MAILING ADDRESS:
5245 NW 112TH AVE APT 3

CITY: DORAL, FL 33178 ZIP: COUNTY:

NAME OF AGENCY:
FRONTERRA CDD, BOARD OF SUPERVISORS

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
ASSISTANT SECRETARY

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

FOR OFFICE USE ONLY:

9-21-21
Processed
265586
Processed Date: 9/24/21 MB
Scanned Date: 10/8/21 RJC
Filing Status Code:

FD119356

9/24/21

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

DISCLOSURE PERIOD:
THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2020.

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
BARRON COLLIER COMPANIES	2600 GOLDEN GATE PARKWAY, NAPLES, FL	LAND DEV. / AGR. / MINERALS

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
N/A			

RECEIVED SEP 24 AM 11:01 MIAMI-DADE COUNTY ELECTIONS DEPT.

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

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
401 K	PRINCIPAL FINANCIAL GROUP

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
SUNCOAST FCU	TAMPA, FL

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")

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

RECEIVED
2021 SEP 24 AM 8:07
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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: 9/17/2021

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, 2020.

Castellanos, Ramon (Elections)

From: Prine.Emily <PRINE.EMILY@leg.state.fl.us>
Sent: Friday, September 24, 2021 8:23 AM
To: Financial Disclosures (Elections)
Subject: Recorded PID 265586
Attachments: Lopez Jaime.pdf

EMAIL RECEIVED FROM EXTERNAL SOURCE

BEFORE THE
STATE OF FLORIDA
COMMISSION ON ETHICS

In re **Jaime Lopez** **PID#: 265586**
Assistant Secretary
Board of Supervisors
Fronterra Community Development District

NOTICE OF ASSESSMENT OF AUTOMATIC FINE

The Commission on Ethics hereby gives notice of an assessment of a fine against you pursuant to Section 112.3145(8)(g), Florida Statutes, due to your failure to timely file your 2020 CE Form 1, Statement Of Financial Interests. Under the law, your 2020 CE Form 1, Statement of Financial Interests, was due by July 1, 2021. The law provided for a penalty-free grace period extending the due date to September 1, 2021. After that date, you accrued fines of $25.00 per day for each day your financial disclosure was late, pursuant to Section 112.3145(8)(g), Florida Statutes.

Inasmuch as your 2020 CE Form 1 was filed September 21, 2021 with the Supervisor of Elections for Miami-Dade County, you are fined the amount of $500.00 ($25.00 per day for 20 day(s) late). This fine must be paid to the Commission on Ethics within 30 days of the date of this notice unless you appeal the fine to the Commission. The Commission has the authority to consider the appeal and waive the fine in whole or in part if your failure to file on time was due to "unusual circumstances" surrounding the failure to file.

HOW TO APPEAL

1. Read these instructions carefully before submitting your appeal.
2. **LEGAL AUTHORITY:** Appeals are governed by Section 112.3145(8)(g)3., Florida Statutes, and Commission Rule 34-8.215, Florida Administrative Code.
3. **FORMAT:** Your appeal must be in writing and mailed to Florida Commission on Ethics, P. O. Drawer 15709, Tallahassee, FL 32317-5709, or delivered to Florida Commission on Ethics, 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303. The appeal may take the form of a letter or you may use the appeal form included in this mailing. The appeal form also is available at the Commission's website: www.ethics.state.fl.us. Click on "Financial Disclosure" and then the link to the sample appeal form.
4. **DUE DATE:** Your appeal must be received by the Commission on Ethics on or before **November 27, 2023**. NOTE: Failure to timely file an appeal will constitute a waiver of your right to appeal and will result in the entry of a default order against you.
5. **UNUSUAL CIRCUMSTANCES:** An appeal must demonstrate that you submitted your CE Form 1 after the extended due date because of "unusual circumstances." "Unusual circumstances" is defined in Commission Rule 34-8.215(4), Florida Administrative Code, as "uncommon, rare, or sudden events over which the reporting individual had no control and which directly result in the failure to act in accordance with the filing requirements." Therefore, circumstances that allowed for time to take steps necessary to file on time do not constitute "unusual circumstances" that will allow the Commission to waive the fine. You have the burden to establish "unusual circumstances." Your appeal must specifically state the circumstances that led to your not filing by September 1, 2021, and must include any documentation or evidence supporting your appeal, such as:
   a. **SICKNESS/INJURY:** a statement from attending physician, including dates and nature of the illness or injury;
   b. **LACK OF NOTICE (WRONG ADDRESS):** documentation that you did not reside at the address to which notice was sent;
   c. **LACK OF NOTICE (ABSENCE FROM HOME):** documentation establishing the period of time of your absence covering the notification period;

d. **CLAIM OF TIMELY FILING OF FINANCIAL DISCLOSURE:** (1) an affidavit from you attesting under oath or affirmation that you filed your financial disclosure and your recollection of when and how you filed and (2) a copy of a certified mail receipt and/or a copy of the completed form which was filed. If you have witnesses to your filing, we also will need an affidavit from each witness. NOTE: A claim of having filed the CE Form 1F for the current year does not satisfy the CE Form 1 filing requirement or excuse a late filing;

e. **LEFT PUBLIC POSITION BEFORE DECEMBER 31, 2020:** confirmation of your last date of office or employment by your former agency, showing the last date to be before December 31, 2020; or

f. **UNCLAIMED CERTIFIED MAIL**: if deliquency notice was addressed correctly but not received, you must explain why.

6. **YOUR RIGHT TO A HEARING:** You have the right to have your appeal heard by the Commission and to appear before the Commission at the hearing, but, to exercise this right, you must specifically request a hearing in your appeal. If you do not request a hearing, you will waive your right to a hearing, the Commission will determine the outcome of your appeal based upon the written record (including the documentation you provide and any documentation in your case file), and you will receive no further notice until after the Commission decides your appeal.

FAILURE TO PAY FINE OR FILE APPEAL WITHIN 30 DAYS

If you do not timely file an appeal or pay the assessed fine within 30 days of this Notice, a default order will be entered against you and the Commission will take the steps provided by law to collect the fine, including:

- Referral to the CFO of the Department of Financial Services, if you are a salaried state officer or employee, for withholding of a portion of you salary until the fine is satisfied; or
- Referral to your agency's governing body for withholding of a portion of your salary until the fine is satisfied;
- Referral to a collection agency, which can seek garnishment of your wages; and/or
- An additional civil penalty, not limited by this automatic fine, may be imposed if your disclosure statement is filed more than 60 days late and a complaint is filed against you pursuant to Section 112.324, Florida Statutes.

Please contact our office if you have any questions about this matter.

CERTIFICATE OF MAILING

I certify that a copy of the foregoing Notice of Assessment of Automatic Fine was furnished to:

Jaime Lopez
5245 Nw 112th Ave Apt 3
Doral, FL 33178 -3804

by Certified Mail on this Thursday, October 26, 2023.

KIMBERLY R. HOLMES
Program Administrator

Florida Commission on Ethics
P. O. Drawer 15709
Tallahassee, FL 32317-5709

-or-

Florida Commission on Ethics
325 John Knox Road, Building E, Ste. 200
Tallahassee, FL 32303

Tel.: (850) 488-7864
Fax: (850) 488-3077
Email: disclosure@leg.state.fl.us

STATE OF FLORIDA
COMMISSION ON ETHICS
PO DRAWER 15709
TALLAHASSEE, FL 32317-5709

9214 8901 0661 5400 0190 1381 83

RETURN RECEIPT (ELECTRONIC)

265586

JAIME LOPEZ
5245 NW 112TH AVE APT 3
DORAL, FL 33178-3804

42
URGENT - Open Immediately!

CUT FOLD HERE

Zone 4

6"X9" ENVELOPE
CUT FOLD HERE

CUT FOLD HERE

IMpbCertified8x5Label v2022.6.16.1

Mail Piece Details

Print this page

Recipient Address

JAIME LOPEZ
5245 NW 112TH AVE APT 3
DORAL, FL 33178-3804

Record / Case Number:
265586

Return Address

STATE OF FLORIDA
COMMISSION ON ETHICS
PO DRAWER 15709
TALLAHASSEE, FL 32317-5709

Entry Point ZIP:
32317

Mail Piece Information

Tracking Number: 9214890106615400019013818 3
Date Created: 10/26/2023 02:39:40 PM
Mail Class: USPS First Class Mail
Special Services: Certified Mail
Return Receipt Electronic
Memo: --
Created By: Kimberly Holmes - Commission on Ethics

Signature Information

Signed For By: JAIME LOPEZ
Signature Status: Available (Click Here)

Having issues viewing the signature file?
Make sure you are using the latest version of Adobe Acrobat Reader

Tracking Information

Pre-Shipment Info Sent To Usps, Usps Awaiting Item, October 26, 2023, 12:00:00 AM

Pre-Shipment Info Sent Usps Awaits Item, October 26, 2023, 01:49:00 PM, TALLAHASSEE,FL 32317

Processed Through Usps Facility, October 28, 2023, 09:12:00 PM, MIAMI FL DISTRIBUTION CENTER 33152

In Transit To Next Facility, Arriving On Time, October 29, 2023, 12:00:00 AM

Processed Through Usps Facility, October 29, 2023, 09:23:00 PM, MIAMI FL DISTRIBUTION CENTER 33152

Delivered Left With Individual, October 30, 2023, 12:32:00 PM, MIAMI,FL 33178

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UNITED STATES POSTAL SERVICE

October 30, 2023

Dear MAIL MAIL:

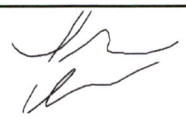
The following is in response to your request for proof of delivery on your item with the tracking number: **9214 8901 0661 5400 0190 1381 83**.

Item Details

Status:	Delivered, Left with Individual
Status Date / Time:	October 30, 2023, 12:32 pm
Location:	MIAMI, FL 33178
Postal Product:	USPS Ground Advantage™
Extra Services:	Certified Mail™
	Return Receipt Electronic
Recipient Name:	JAIME LOPEZ

Recipient Signature

Signature of Recipient:



Address of Recipient: 5245 NW 112TH AVE APT 3, DORAL, FL 33178

Note: Scanned image may reflect a different destination address due to Intended Recipient's delivery instructions on file.

Thank you for selecting the United States Postal Service® for your mailing needs. If you require additional assistance, please contact your local Post Office™ or a Postal representative at 1-800-222-1811.

Sincerely,
United States Postal Service®
475 L'Enfant Plaza SW
Washington, D.C. 20260-0004

The customer reference information shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

Reference ID: 9214890106615400019013818 3
265586
JAIME LOPEZ
5245 NW 112th Ave Apt 3
Doral, FL 33178-3804

Form Year 2020 Filed Forms

FORM TYPE	DATE SUBMITTED	FORM SIGNED	FILED BY EMAIL?	UPDATED BY	COMMENTS
Form 1	09/21/2021	No	Yes	Emily Prine	Received by COE on behalf of Miami-Dade Supervisor of Elections

Fine Year 2021 Fine Information

FINE BALANCE	STATUS	FINE DATE	ORIGINAL FINE AMOUNT	ADJUSTED FINE AMOUNT	LAST PAYMENT DATE	PAYMENT PLAN START DATE	PAYMENT PLAN AMOUNT	TOTAL PAYMENT PLAN AMOUNT DUE
$500.00	Appeal	10/25/2023	$500.00	$500.00				

Fine Address: 5245 Nw 112th Ave Apt 3, Doral, FL 33178-3804
Email: JLopez@barroncollier.com
Org/Suborg: Fronterra Community Development District - Board of Supervisors

Fine Year 2021 Appeal Information

2021 FINE APPEAL - FD 21-080	No Hearing Scheduled
APPEAL STATUS	Active
APPEAL RECEIPT DATE	01/25/2024
APPEAL TIMELY FILED	No
PRINT APPEAL LETTER	
HEARING REQUESTED	No
APPEAL REASON	Lack of Notification
APPEAL NOTES	
APPEAL NUMBER	FD 21-080
APPEAL ANALYST ASSIGNED	
FINAL ORDER NUMBER	
FINAL ORDER DATE	

Fine Year 2021 Payment Information

DATE POSTED	DESCRIPTION	AMOUNT	METHOD	PAYMENT ID	COMMENT
10/25/2023	Fine Levied	+$500.00			Fined $500.00

Current Balance: $500.00

Fine Year 2021 Event Chronology

DATE	TYPE	DESCRIPTION	ADDRESS/EMAIL	REFERENCE
09/08/2021	Filer Correspondenc Letter	Courtesy Notice of Fines Accruing - Courtesy Notice of Fines Accruing	4680 Saint Croix Ln Apt 528, Naples, FL 34109-3564 UNKNOWN@email.com	KimberlyHolmes

10/25/2023	Fine Levied	Fined $500.00		Journal: Fine_Miami-Dade_2023-10-25-09:58
10/25/2023	Notice of Assessed Fine	Initial Fine Notice		Journal: Fine1st__2023-10-25-10:20
10/26/2023	Filer Correspondence Letter	Notice of Assessed Fine - Filer 1st Fine Letter	5245 Nw 112th Ave Apt 3, Doral, FL 33178-3804 UNKNOWN@email.com	Correspondence Queue: 2023-10-26 00:00:00 Correspondence Sent: 2023-10-26 00:00:00.0000000
06/05/2024	Filer Correspondence: Letter	Fine Appeal - Fine Appeal	5245 Nw 112th Ave Apt 3, Doral, FL 33178-3804 JLopez@barroncollier.com	Correspondence Queue: 2024-06-05 00:00:00 Correspondence Sent: 2024-06-05 00:00:00.0000000
06/05/2024	Fine Appeal	FD 21-080		Journal: Appeal_2024-06
06/05/2024	Fine Appeal Update	FD 21-080		Journal: AppealUpdate_2024-06

Created Date: 6/5/2024
Type: Letter
Created By: System
Description: Fine Appeal - Fine Appeal

Created Date: 1/25/2024
Type: Email
Created By: Emily E Prine
Description:
From: Jaime Lopez <JLopez@barroncollier.com>
Sent: Thursday, January 25, 2024 11:53 AM
To: COE-Disclosure <disclosure@leg.state.fl.us>
Subject: PID#: 265586 - Jaime Lopez

You don't often get email from jlopez@barroncollier.com . Learn why this is important

Good morning Ms. Homes,

I hope this email finds you well. Please find attached a copy of the documentation that has been sent via certified mail for my case PID 265586 in relation to form 2020 CE Form 1.

As stated in the letter, I am hopeful that due to the misunderstanding in the change of addresses, the appeal is considered and accepted. Please do not hesitate to contact me if you need additional information.

Thank you in advance for your time and consideration.

Sincerely,

Created Date: 1/25/2024
Type: Email
Created By: Emily E Prine
Description:
From: COE-Disclosure
Sent: Thursday, January 25, 2024 1:11 PM
To: 'Jaime Lopez' <JLopez@barroncollier.com>
Subject: RE: PID#: 265586 - Jaime Lopez
Importance: High

Jaime Lopez,

The information and attachment has been received. Once a determination has been made, you will be notified.

The appeal process can be lengthy and does take a significant amount of time.

You are welcome to email for a status update. If at any time, your contact information changes please notify our office.

Thank you.

Created Date: 10/26/2023
Type: Letter
Created By: System
Description: Notice of Assessed Fine - Filer 1st Fine Letter

Created Date: 9/21/2021
Type: Phone
Created By: admin system
Description: Spoke with coordinator seems to have been some miscommunication about address and proper notifications. Filer did submit a Final 1F 2021. Does reside in Miami-Dade

Created Date: 9/21/2021
Type: Phone
Created By: admin system
Description: Spoke with coordinator seems to have been some miscommunication about address and proper notifications. Filer did submit a Final 1F 2021. Does reside in Miami-Dade

Created Date: 9/21/2021
Type: Email
Created By: admin system
Description: From: Jaime Lopez Sent: Tuesday, September 21, 2021 1:47 PM To: Prine.EmilyCc: Russ WeyerSubject: Form 2020i Good afternoon Emily, Per your conversation with Russ Weyer, I have attached my completed Form 2020i. Please let me know if you need anything else. Thank you for your assistance. Sincerely, Jaime Lopez

Created Date: 9/21/2021
Type: Email
Created By: admin system
Description: From: Prine.Emily Sent: Tuesday, September 21, 2021 1:50 PM To: 'Jaime Lopez' Cc: Russ Weyer; 'Castellanos, Ramon (Elections)' Subject: RE: Form 2020i Thank you! Form has been recorded. I will forward stamped copy to Miami-Dade Supervisor of Elections once we complete our process.

Created Date: 9/8/2021
Type: Letter
Created By: System
Description: Courtesy Notice of Fines Accruing - Courtesy Notice of Fines Accruing

Created Date: 8/20/2021
Type: Postcard
Created By: System
Description: Courtesy Postcard Reminder - Courtesy Postcard Reminder