

## FORM 1

STATEMENT OF  
FINANCIAL INTERESTS

2016

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

FOR OFFICE USE ONLY:

LAST NAME - FIRST NAME - MIDDLE NAME:

FISHER - Lamar - Paul (71304)

MAILING ADDRESS:

100 W. ATLANTIC Blvd.

Pompano Beach, FL 33060

Broward

CITY:

ZIP:

COUNTY:

City of Pompano Beach

NAME OF AGENCY:

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

Mayor - at - Large

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

## \*\*\*\* BOTH PARTS OF THIS SECTION MUST BE COMPLETED \*\*\*\*

## DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):

☒ DECEMBER 31, 2016 OR ☐ SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: \_\_\_\_\_

## 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 |
|--------------------------------------|-------------------------------------------------|---------------------------------------------------------|
| FISHER Auction Company<br>(OWN 100%) | 2112 E. ATLANTIC Blvd., Pompano Beach, FL 33062 | Real Estate Auctions                                    |
|                                      |                                                 |                                                         |
|                                      |                                                 |                                                         |

## 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")

Building: 2112 E. ATLANTIC Blvd., Pompano Beach, FL 33062 / 100% Owned

Lot: 100 Block of S Fed Hwy Pompano Beach, FL 33062 / 100% Owned

Building: 23 SE. 22 Ave., Pompano Beach, FL 33062 / 25% Owned

Building: 140 S Fed Hwy. Pompano Beach, FL 33062 / 25% Owned

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]<br>(If you have nothing to report, write "none" or "n/a") |                                               |
| TYPE OF INTANGIBLE                                                                                                                                                | BUSINESS ENTITY TO WHICH THE PROPERTY RELATES |
| <i>See Attached</i>                                                                                                                                               |                                               |


|                                                                                                                 |                                           |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| PART E — LIABILITIES [Major debts - See instructions]<br>(If you have nothing to report, write "none" or "n/a") |                                           |
| NAME OF CREDITOR                                                                                                | ADDRESS OF CREDITOR                       |
| <i>Circle K Bank - Home Mortgage</i>                                                                            | <i>P.O. Box 24696, Columbus, OH 43224</i> |
| <i>Wells Fargo Bank - Bldg. Mortgage</i>                                                                        | <i>P.O. Box 4677, Columbus, OH 43228</i>  |
| <i>Private Mortgage of Bldg. Owned</i>                                                                          |                                           |

|                                                                                                                                                                                 |                                         |                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------|
| PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]<br>(If you have nothing to report, write "none" or "n/a") |                                         |                                         |
|                                                                                                                                                                                 | BUSINESS ENTITY # 1                     | BUSINESS ENTITY # 2                     |
| NAME OF BUSINESS ENTITY                                                                                                                                                         | <i>Fusion Marketing Real Estate LLC</i> | <i>Fusion Marketing, LLC</i>            |
| ADDRESS OF BUSINESS ENTITY                                                                                                                                                      | <i>2112 E. Astor Ave. Bldg. PB 3366</i> | <i>2112 E. Astor Ave. Bldg. PB 3366</i> |
| PRINCIPAL BUSINESS ACTIVITY                                                                                                                                                     | <i>Real Estate Brokerage</i>            | <i>Real Estate Brokerage / Account</i>  |
| POSITION HELD WITH ENTITY                                                                                                                                                       | <i>Managing Member</i>                  | <i>100% Own</i>                         |
| I OWN MORE THAN A 5% INTEREST IN THE BUSINESS                                                                                                                                   | <i>50% Owned</i>                        | <i>100% Owned</i>                       |
| NATURE OF MY OWNERSHIP INTEREST                                                                                                                                                 | <i>Real Estate Entrepreneur</i>         | <i>Real Estate Entrepreneur</i>         |

PART G — TRAINING  
For elected municipal officers 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 ☐

|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>SIGNATURE OF FILER:</b></p> <p>Signature: </p> <p>Date Signed: <u>6/24/17</u></p> | <p><b>CPA or ATTORNEY SIGNATURE ONLY</b></p> <p>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:</p> <p>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.</p> <p>CPA/Attorney Signature: _____</p> <p>Date Signed: _____</p> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| <p align="center"><b>FILING INSTRUCTIONS:</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <p><b>WHAT TO FILE:</b></p> <p>After completing all parts of this form, <u>including signing and dating it</u>, send back only the first sheet (pages 1 and 2) for filing.</p> <p>If you have nothing to report in a particular section, write "none" or "n/a" in that section(s).</p> <p><b>NOTE:</b></p> <p><b>MULTIPLE FILING UNNECESSARY:</b></p> <p>A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.</p> <p><b>Facsimiles will not be accepted.</b></p> | <p><b>WHERE TO FILE:</b></p> <p>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.</p> <p><b>Local officers/employees</b> 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.)</p> <p><b>State officers or specified state employees</b> file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.</p> <p><b>Candidates</b> file this form together with their qualifying papers.</p> <p>To determine what category your position falls under, see page 3 of instructions.</p> | <p><b>WHEN TO FILE:</b></p> <p><b>Initially</b>, each local officer/employee, state officer, and specified state employee must file <u>within 30 days</u> 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.</p> <p><b>Candidates</b> must file at the same time they file their qualifying papers.</p> <p><b>Thereafter</b>, file by July 1 following each calendar year in which they hold their positions.</p> <p><b>Finally</b>, 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 <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2016.</p> |

## Part D-Intangible Personal Property

### Type of Intangible/Business Entity To Which The Property Relates

- 1) 100% Ownership/Fisher Auction Company
- 2) 100% Ownership/Fisher Auctions LLC
- 3) 25% Ownership/LBF Properties LLC
- 4) 25% Ownership/110 Property LLC
- 5) Money Market/Stonegate Bank
- 6) Money Markets/SunTrust Bank
- 7) IRA/Gold
- 8) 401K/Templeton Global Bond A, PIMCO Investment Grade Corp Bd, Fidelity Advisor New Insights, Goldman Sachs Large Cap Value
- 9) Fisher Auction Company Profit Sharing Plans/Allianz; AZL Balanced Index, AZL Investco Equity and Income Fund, Blackrock Global Allocation V.I. Fund, PIMCO Vit Allianz Asset Portfolio, PIMCO Vit Total Return Portfolio, PIMCO Unconstrained Bond Portfolio. TD Ameritrade Institutional.