

FLORIDA
COMMISSION ON ETHICS

APR 16 2025

RECEIVED

Rod Lincoln
39145 Pretty Pond Rd
Zephyrhills, FL 33540
813-997-4449
rlin470339@aol.com

April 14, 2025

State of Florida
Commission Of Ethics
P.O. Drawer 15709
Tallahassee, FL, 32303

Millie W. Fulford
Complaint Coordinator
fulford.millie@leg.state.fl.us

RE: Complaint No. 25-064
Rod Lincoln

Dear Millie,

My original understanding of the filing requirement was that we had to send in a full financial statement and it would be open to the public. After having a discussion with other board members I learned that I did not have to file a complete financial statement and I decided not to turn in my resignation and I went ahead and filed the required reports but I missed the year 2021.

I talked to someone at the state Commission of Ethics last month and they directed me to a site where I could download the form for 2021. I manually completed the form and tried to get online and file but couldn't seem to get to the correct online location to file the completed 2021 form. So, I am sending in the completed 2021 form with this letter.

I apologize for all the general and administrative time this is taking. I certainly didn't want to violate any ethics laws and will get these types of situations resolved as soon as possible in the future.

Please let me know if there is anything else you will need from me to get this situation resolved.

Thank you for your time.

Sincerely,

Rod Lincoln

FORM 1

STATEMENT OF
FINANCIAL INTERESTS

2021

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME:

LINCOLN Rodney Dennis

MAILING ADDRESS:

39145 PRETTY POND ROAD

CITY:

ZEPHYRHILLS

ZIP:

33540

COUNTY:

PASCO

NAME OF AGENCY:

VOPH

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

BOARD MEMBER

CHECK ONLY IF ☐ CANDIDATE OR ☐ NEW EMPLOYEE OR APPOINTEE

Received 4-16-2025

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*** THIS SECTION MUST BE COMPLETED ***

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2021.

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
R.C. LINCOLN INC	6529 STADIUM DRIVE ZEPHYRHILLS FL	Food Service
L.D. MITCHELL INC	6529 STADIUM DRIVE ZEPHYRHILLS FL	RANCHING - COW - CALF

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
LINCOLN SPRINGS RANCH	FARMING	Joplin MONTANA	FARM WHEAT
CL. CHAMBERS INC	REAL ESTATE RENTAL	6529 STADIUM DR ZEPHYRHILLS FL	REAL ESTATE

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
CASH ACCOUNTS	R-C LINCOLN INC

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
BANK Florida 2024	36450 Emerald Blvd Zephyrhills FL 33542
CENTRAIR BANK 2021	37741 Emerald Blvd Zephyrhills FL 33542

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	R-C LINCOLN INC	L.D MITCHELL INC
ADDRESS OF BUSINESS ENTITY	6529 STADIUM DRIVE	6529 STADIUM DR ZEPHYRHILLS
PRINCIPAL BUSINESS ACTIVITY	FOOD SERVICE	RANCHING
POSITION HELD WITH ENTITY	OWNER OPERATOR	OWNER/OPERATOR
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	YES	YES
NATURE OF MY OWNERSHIP INTEREST	OWNER OPERATOR	OWNER/OPERATOR

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:

Rose Lincoln

Date Signed:

4-4-2025

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, 2021.