**FORM 1**

**STATEMENT OF FINANCIAL INTERESTS**

**LAST NAME** -- **FIRST NAME** -- **MIDDLE NAME**:

**MAILING ADDRESS**:

**CITY**:

**ZIP**:

**COUNTY**:

**NAME**

Annette Wexler 8493
Pembroke Park
2450 S Park Rd
Apt 202
Hallandale Bch, FL 33009

You are

**CHECK ONLY IF**

☐ CANDIDATE OR

☐ NEW EMPLOYEE OR APPOINTEE

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**444 BOTH PARTS OF THIS SECTION MUST BE COMPLETED 444**

**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, 2015 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

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**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")

<table>
<thead>
<tr>
<th>NAME OF SOURCE OF INCOME</th>
<th>SOURCE'S ADDRESS</th>
<th>DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Town of Pembroke Pk.</td>
<td>3150 SW 50th Ave. Pembroke 33023</td>
<td>Commissioner</td>
</tr>
</tbody>
</table>

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**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")

<table>
<thead>
<tr>
<th>NAME OF BUSINESS ENTITY</th>
<th>NAME OF MAJOR SOURCES OF BUSINESS' INCOME</th>
<th>ADDRESS OF SOURCE</th>
<th>PRINCIPAL BUSINESS ACTIVITY OF SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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**PART C -- REAL PROPERTY**

[Land, buildings owned by the reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

<table>
<thead>
<tr>
<th></th>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

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*(Continued on reverse side)*