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DIVISION OF ELECTIONS
TALLAHASSEE, FL

General Information

Name: Mr Anthony Vincent Brice

Organization	Suborganization	Title
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N/A

CANDIDATE FOR

Position	Agency Name	Position sought or held
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State Senate	Florida Senate	District 11
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Net Worth

My Net Worth as of December 31, 2024 was \$ 845,688.14.

For Qualifying Purposes Only

2024 Form 6 - Full and Public Disclosure of Financial Interests

Assets

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effect is N/A.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Checking Account	\$ 4,056.14
Kubota L3560 Tractor	\$ 30,000.00
Dodge Ram 1500 4x4 Truck SLT	\$ 30,000.00
Triple K Tandem Livestock Trailer	\$ 11,500.00
3798 S Cormorant Ter Inverness fl 34450	\$ 787,611.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Kubota	P.O. Box 2046 Grapevine, Tx 76099	\$ 4,440.86
First Bank	12345 W Colfax ave Lakewood CO 80215	\$ 9,902.59

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

2024 Form 6 - Full and Public Disclosure of Financial Interests

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2024 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2024 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
SSI/DI	1100 West High Rise 6401 Security Baltimore MD 21235 Blvd	\$ 24,396.00
St Petersburg VA Regional Disability Benefits Office	9500 Bay Pines Blvd St. Petersburg FL 33744	\$ 47,352.00

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

Interests in Specified Businesses

Business Entity # 1
N/A

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Anthony Vincent Brice

Digitally signed: 07/27/2025

For Qualifying
Purposes Only