



CONFIDENTIAL – Not for Public Release

Planning & Development Department
Licensing Regulation & Enforcement
2725 Judge Fran Jamieson Way
Building A, Room 114
Viera, Florida 32940
PH: 321-633-2058

Email: building.licensing@BrevardFL.gov

BOARD OF COUNTY COMMISSIONERS

August 26, 2025

Fort Pierce
Contractor Licensing Department
100 N US Hwy 1
Ft. Pierce, FL 34950

RE: Giovanni Calderin
Liberty Fencing Group Inc
292 Clearlake Rd.
Cocoa, FL 32922

COC # 24-FE-CT-00110

This is to certify that the above named applicant successfully passed the prepared, proctored and graded examination(s) indicated.

EXAM COMPANY	EXAM	DATE	SCORE
Prov Inc	Fencing Contractor	09/26/2024	84%
Prov Inc	Business and Law	09/25/2024	88%

The Certificate is currently: Active Inactive Delinquent Pending
He was required to provide: 1 year(s) of experience in the trade.

Number of complaints: 0

Types of complaints: Technical 0 Consumer 0

Yes No

Fines	<u> </u>	<u> X </u>
Suspensions	<u> </u>	<u> X </u>
Revocations	<u> </u>	<u> X </u>
Other Action	<u> </u>	<u> X </u>
Probation	<u> </u>	<u> X </u>

Comments: Mr. Calderin was certified as a Fence Contractor in Brevard County on 10/23/2024. His record is in good standing.

Sincerely,

Kinga Ataman, Certification Specialist II
Brevard County Licensing Regulation & Enforcement

2024 - 2025

BREVARD COUNTY BUSINESS TAX RECEIPT
SUBJECT TO COUNTY ZONING RESTRICTIONS
TAX RECEIPT SHOULD BE DISPLAYED ON PREMISES

ACCOUNT NO.
189960

THE PERSON(S), OR ENTITY BELOW:
LIBERTY FENCING GROUP INC
292 CLEARLAKE RD
COCOA, FL 32922

BUSINESS PERIOD: October 01, 2024 - September 30, 2025
EXPIRES: SEPTEMBER 30, 2025

ISSUED PURSUANT AND SUBJECT TO FLORIDA STATUTES AND BREVARD COUNTY CODE ISSUANCE DOES NOT CERTIFY COMPLIANCE WITH ZONING OR OTHER LAWS. BUSINESS TAX RECEIPT IS SUBJECT TO REVOCATION FOR ZONING VIOLATIONS, AND / OR FAILURE TO MAINTAIN REGULATORY PRE-REQUISITES AS REQUIRED FOR BUSINESS CLASSIFICATION(S), OR SUBSEQUENT ACTIVITIES. NOTIFY TAX COLLECTOR UPON CLOSING OF BUSINESS. A PERMIT IS REQUIRED TO ADVERTISE (Including with signage) "GOING OUT OF BUSINESS".

DBA

LOCATION:
290-292 CLEARLAKE RD
COCOA, FL 32922

LISA CULLEN, CFC, Brevard County Tax Collector
P O Box 2500, Titusville, Florida 32781-2500
(321)264-6969 or (321)633-2199

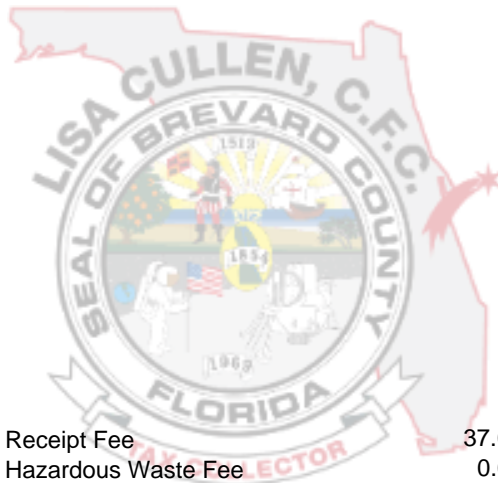
UPON A CHANGE OF OWNERSHIP OR LOCATION,
BUSINESS TAX RECEIPT SHOULD BE TRANSFERRED WITHIN 30 DAYS.

OWNED BY:
LIBERTY FENCING GROUP INC

BUSINESS CLASSIFICATIONS, DISCLAIMERS, AND RELATED FEES:

EXEMPTIONS: 0.00

820005 RECEIPT AMT
300261 FENCE CONTRACTOR
255 ZONING RESTRICTIONS APPLY-ZUP



Receipt Fee 37.00
Hazardous Waste Fee 0.00
Zoning Application Fee 25.00
Building Occupancy Review Fee 45.00
Fire Prevention Fee 15.00
Late Penalty 0.00
NSF Fee 0.00
Transfer Fee 0.00

Paid 000-25-00058035 11/13/2024 122.00

MAIN OFFICE: 400 South St., 6th Floor, Titusville, FL 32780

BRANCH OFFICES: Merritt Island Office, 1605 N. Courtenay Pkwy
Melbourne Office, 1515 Sarno Road
Palm Bay Office, 450 Cogan Dr. SE
Titusville Office, 800 Park Ave.
Indian Harbour Beach Office, 240 E. Eau Gallie Blvd.
Viera Office, 2725 Judge Fran Jamieson Way, #A108, Viera, FL 32940



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07-29-2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Florida State Underwriters, Inc dba FSU Insurance 950 S Winter Park Dr STE 310 Casselberry, FL 32707	CONTACT NAME: Scott Richardson PHONE (A/C No. Ext): (407)260-1046 E-MAIL ADDRESS: scott@fsuinsurance.com	FAX (A/C, No): (407)260-1275	
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Liberty Fencing Group Inc DBA: Liberty Fencing of Flagler Inc 18 Enterprise Dr Unit C Bunnell, FL 32110-4301	INSURER A: Clear Blue Insurance Comp.		28860W
	INSURER B: Progressive Express Insurance Company		10193
	INSURER C:		
	INSURER D:		
	INSURER E:		

COVERAGES

CERTIFICATE NUMBER: 00003806-D96BD0D1

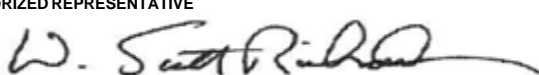
REVISION NUMBER: 36

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			BGFL0030960301	06/07/2025	06/07/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			982261605	06/07/2025	06/07/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

Fort Pierce 100 N US Hwy 1 Fort Pierce, FL 34950	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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CERTIFICATE OF COMPETENCY – REGISTERED & SPECIALTY CONTRACTORS

CITY CLERK, 100 N US HWY 1, FORT PIERCE, FL 34950
PH: 772-467-3065 cityclerk@cityoffortpierce.com

Financial Statement

Name of Business Liberty Fencing Group Inc Date 8-28-25

ASSETS

Current Assets	Amounts
Cash in Bank	\$ 175K
Notes Receivable	0
Accounts Receivable	261K
Inventory	185K
U.S. Government Securities	0
Other Current Assets	0
Total Current Assets	\$ 621K
Land	0
Machinery, fixtures, equipment (after depreciation)	60K
Cash value life insurance	0
Stocks & Bonds	0
Prepaid Expenses & Deferred Charges	0
Total Assets	\$ 681K

LIABILITIES

Current Liabilities	Amounts
Accounts Payable	\$ 200K
Notes Payable to Bank	/
Other Notes Payable	/
Notes Receivable Discounted	/
Mortgage & Bonds Payable	/
Other Current Liabilities	wages - 20K
Credit cards	30K
Total Current Liabilities	\$ 250K
Other Liabilities (Due after one year)	/
Total Liabilities	\$ /
Capital Stock Surplus	/
Capital (Individual or partnership)	/
Net Worth	\$ 431K
Total Liabilities & Net Worth	\$250K / 431K

* Total Assets **MUST** equal Total Liabilities & Net Worth.

The undersigned certifies that the information submitted is true and correct:

Signature: [Signature]

Title: president

State of Florida }
St. Lucie County }

The foregoing instrument was sworn to be true and correct before me this 28 day of August, 2025, by Giovanni Calderin



SAMANTHA WHITE
Commission # HH 633453
Expires January 29, 2029

(SEAL)

[Signature]
Notary Signature



CERTIFICATE OF COMPETENCY – REGISTERED & SPECIALTY CONTRACTORS

CITY CLERK, 100 N US HWY 1, FORT PIERCE, FL 34950
PH: 772-467-3065 cityclerk@cityoffortpierce.com

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Name of Business Liberty Fencing Group Inc Date 8.20.25

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Cash in Bank	\$ 175K
Notes Receivable }	261K
Accounts Receivable }	
Inventory	185K
U.S. Government Securities	/
Other Current Assets	/
Total Current Assets	\$ 621K
Land	/
Machinery, fixtures, equipment (after depreciation)	60K
Cash value life insurance	/
Stocks & Bonds	/
Prepaid Expenses & Deferred Charges	/
Total Assets	\$ 681K

LIABILITIES

Current Liabilities	Amounts
Accounts Payable	\$ 200K
Notes Payable to Bank	/
Other Notes Payable	/
Notes Receivable Discounted	/
Mortgage & Bonds Payable	/
Other Current Liabilities ^{credit card wages}	50K
Total Current Liabilities	\$ 250K
Other Liabilities (Due after one year)	
Total Liabilities	\$ 250K
Capital Stock Surplus	
Capital (Individual or partnership)	
Net Worth	\$
Total Liabilities & Net Worth	\$ 431K

* Total Assets **MUST** equal Total Liabilities & Net Worth.

The undersigned certifies that the information submitted is true and correct:

Signature: [Handwritten Signature]

Title: president

State of Florida }
St. Lucie County }

The foregoing instrument was sworn to be true and correct before me this 20 day of August, 2025, by Samantha White



SAMANTHA WHITE
Commission # HH 633453
Expires January 29, 2029

(SEAL)

[Handwritten Signature]
Notary Signature

Florida DRIVER LICENSE

USA


C610-971-60-700-0 CLASS E

1 CALDERIN RODRIGUEZ
2 GIOVANNI
3 872 COVINGTON CT
4 ROCKLEDGE, FL 32955-2546

5 31 DOB 08/08/1995 13 SEX M
6 12 REST B 16 HGT 5'-07"
7 9A END NONE

8 4R ISS 05/16/2022
9 SID X6525917400386
10 REPLACED 01/26/2025
11 Operation of a motor vehicle constitutes
12 consent to any sobriety test required by law.

VETERAN



ASSOCIATED CREDIT REPORTING, INC.

Established 1985

7737 North University Drive, Suite 206, Tamarac, FL 33321
www.associatedcreditreporting.com

Telephone: 954-543-9400
Fax Number: 954-543-9411
Toll Free Telephone: 800-676-7640
Toll Free Fax Number: 800-235-7185

City of Fort Pierce
City Clerk's Office
100 North U.S. Highway 1
Fort Pierce, Florida 34950

September 10, 2025

Giovanni Calderin Rodriguez
Social Security Number: 596-48-8244

Credit History:

See enclosed credit report obtained from Equifax.

FICO Score: **702**

Public Record Search:

PUBLIC RECORDS HAVE BEEN CHECKED AT THE LOCAL, STATE AND FEDERAL LEVELS.

Search results: **CLEAR**

END OF REPORT

Response From Equifax*

Full Name: Giovanni Calderin Rodriguez
SSN: [REDACTED]
File Pulled: 9/10/2025
User ID/Member Number: 403ZB00048
Date of Birth: 8/8/1995

Customer Inquiry

Customer Name: Giovanni Calderin
Date of Birth: 8/8/1995
SSN: N/A
Address: 872 Covington Court, Rockledge FL 33467
Customer Reference Number: ACRMATTHEW

Consumer Information*

Other Names: Giovanni Calderin
Current Address: 872 Covington Ct, Rockledge FL 32955
Date Reported Address: 8/20/2025
Address Variance Indicator: N/A
Current Phone Number: N/A
Date Reported Phone: N/A

SSN Status: N/A
SSN Match Flags: N/A
Issue Date: N/A
Issue State: N/A
Death Date: N/A
Death State: N/A
Date File was Established: 3/1/2013
Date of Most Recent Activity: 8/26/2025

[View All Historical Consumer Information](#)

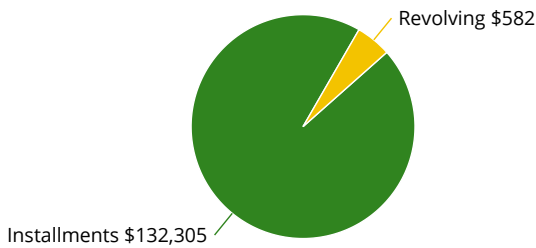
Alerts and Triggers*

Address Discrepancy Indicator

- No substantial difference occurred

[View All Alerts and Triggers Details](#)

Account Overview*



[View Trade Summary & Account Details](#)

Accounts Summary*

7

Revolving:	1
Installments:	6
Mortgage:	0
Line of Credit:	0
Other:	0
Length of Credit History:	6 years and 4 months
Average Account Age:	2 years and 6 months
Oldest Open Account:	BRIDGECREST CREDIT C (5/18/2019)
Most Recent Account:	BRIDGECREST CREDIT C (1/26/2025)

Last Reported Employment*

Occupation: N/A
Employer: C Tek Construction
Date First Reported: 9/2020
Date Last Reported: 4/2025

FICO SCORE 10

702

- Ratio Of Balance To Limit On Bank Revolving Or Other Rev Accts Too High
- Length Of Time Revolving Accounts Have Been Established
- Too Many Inquiries Last 12 Months
- Time Since Most Recent Account Opening Is Too Short

Model

Data Not Available

Potential Negative Info*

30 Day Delinquencies: 0
60 Day Delinquencies: 0
90 Day Delinquencies: 0
Bankruptcies: 0
Collections: 0

Recent Bankruptcy*

Date Filed: N/A
Type of Bankruptcy: N/A
Date Reported: N/A
Filer: N/A
Intent: N/A
Current Disposition Date: N/A
Industry Codes: N/A
Narrative Codes: N/A

[View All Bankruptcy Details](#)

3rd Party Collections*

Date Reported: N/A
Original Creditor Name: N/A
Creditor Classification Code: N/A
Status Code: N/A
Original Amount: \$0
Balance: \$0
Last Payment Date: N/A

[View All 3rd Party Collection Details](#)

Alerts and Triggers***1. Address Discrepancy Indicator**

- No substantial difference occurred
-

Consumer Statement

Data Not Available

Bankruptcy Details*

Data Not Available

3rd Party Collection Details*

Data Not Available

FICO SCORE 10

702

- Ratio Of Balance To Limit On Bank Revolving Or Other Rev Accts Too High
- Length Of Time Revolving Accounts Have Been Established
- Too Many Inquiries Last 12 Months
- Time Since Most Recent Account Opening Is Too Short

Score Range: 300 - 850

Consumer Rank: 41%

Trades Summary & Account Status*

	Mortgage	Revolving	Installment	Line of Credit	Other
Total Accounts	0	1	6	0	0
Total w/ Balance	0	1	5	0	0
Total Balance	\$0	\$582	\$132,305	\$0	\$0
Scheduled Payments	\$0	\$25	\$3,893	\$0	\$0
Actual Payments	\$0	\$0	\$6,309	\$0	\$0
Oldest Date Opened	0	6/26/2024	5/18/2019	0	0
Newest Date Reported	0	8/18/2025	7/31/2025	0	0
Balloon Payment	\$0	\$0	\$0	\$0	\$0
Total Credit Limit	\$0	\$800	\$0	\$0	\$0
Total High Credit	\$0	\$1,285	\$158,166	\$0	\$0
Total Past Due	\$0	\$0	\$0	\$0	\$0
30 Days	0	0	0	0	0
60 Days	0	0	0	0	0
90+ Days	0	0	0	0	0
Utilization	N/A	73%	N/A	N/A	N/A

Historical Consumer Information*

Other Name	Date Reported	Status Reported
Calderin, Giovanni	N/A	Former
Address Reported	Date Reported	Status Reported
872 Covington Ct, Rockledge, FL 32955	1/31/2025	Current
494 S Atlantic Ave Apt 213, Cocoa Beach, FL 32931	11/25/2024	Former
2905 Railside Loop Apt 304, Sanford, FL 32771	7/2024	Additional
58 Calle Amatista Villa Blanca, Caguas, PR 00725	9/2023	Additional
494 S Atlantic Ave Apt 213, Cocoa Beach, FL 32931	9/2022	Additional
3338 Lake Brook Blvd, Knoxville, TN 37909	2/2021	Additional
7031 Knoxville Hwy, Oliver Springs, TN 37840	6/2020	Additional
225 Flat Fork Rd, Wartburg, TN 37887	6/2019	Additional
130 Calle Jardines, Caguas, PR 00725	3/2013	Additional

Employment Information*

Last Reported Employment

Occupation: N/A
Employer: C Tek Construction
Date First Reported: 9/2020
Date Last Reported: 4/2025

Former Employer

Occupation: N/A
Employer: Global Communication
Date First Reported: 2/2020
Date Last Reported: 4/2025

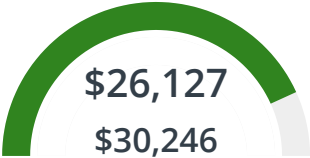
Credit Inquiries*

Date Of Inquiry	Customer Name	Member Number
7/15/2025	CCR/HIGHLAND MORTGAG	180ZB12938
4/9/2025	ALLY FINANCIAL	436FA00145
4/9/2025	TERRY TAYLOR FORD CO	991AN88614
10/2/2024	ASSOCIATED CREDIT RE	403ZB00048
8/6/2024	Factual Data Consume	497ZB00821
6/26/2024	CAPITAL ONE BANK USA	484BB05812

Accounts*

1 INSTALLMENTS

BRIDGECREST CREDIT C 152AU11874



ACCOUNT NUMBER
20027361

Account Type: Auto	Balance: \$26,127	
Account Owner: Individual Account	Credit Limit: \$0	
Rate/Status: Pays account as agreed	High Credit: \$30,246	
Date Opened: 2/22/2024	Scheduled Payment: \$680	
Date Reported: 7/31/2025	Actual Payment: \$680	
Last Payment Date: 7/2025	Past Due: \$0	
Charge Off Amount: \$0	Date Last Activity: 7/2025	Months Reviewed: 17
Deferred Payment Start:	Date Major First Delinquency Reported:	Date Closed:
Terms Frequency: Monthly (Due Every Month)	Creditor Classification: N/A	Balloon Payment Amount: \$0
Terms Duration: 75 Months	Original Creditor Name: N/A	Balloon Payment Due Date:
Narrative Codes: Auto		

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1						
2024		1	1	1	1	1	1	1	1	1	1	1
2023												

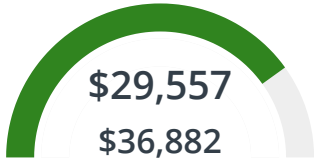
2

INSTALLMENTS

BRIDGECREST CREDIT C 152AU11874

ACCOUNT NUMBER

20022403



Account Type: Auto
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 3/21/2023
 Date Reported: 7/31/2025
 Last Payment Date: 7/2025

Balance: \$29,557
 Credit Limit: \$0
 High Credit: \$36,882
 Scheduled Payment: \$1,014
 Actual Payment: \$1,014
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: 75 Months
 Narrative Codes: Auto

Date Last Activity: 7/2025
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A

Months Reviewed: 28
 Date Closed:
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1						
2024	1	1	1	1	1	1	1	1	1	1	1	1
2023							1	1	1	1	1	1

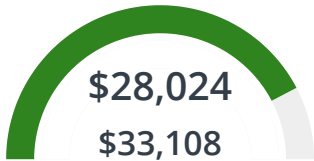
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INSTALLMENTS

BRIDGECREST CREDIT C 152AU11874

ACCOUNT NUMBER

20024955



Account Type: Auto
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 9/8/2023
 Date Reported: 7/31/2025
 Last Payment Date: 7/2025

Balance: \$28,024
 Credit Limit: \$0
 High Credit: \$33,108
 Scheduled Payment: \$873
 Actual Payment: \$873
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: 72 Months
 Narrative Codes: Auto

Date Last Activity: 7/2025
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A

Months Reviewed: 22
 Date Closed:
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1						
2024	1	1	1	1	1	1	1	1	1	1	1	1
2023									1	1	1	1

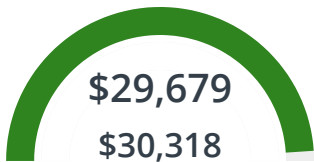
4

INSTALLMENTS

BRIDGECREST CREDIT C 152AU11874

ACCOUNT NUMBER

20033885



Account Type: Auto
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 1/26/2025
 Date Reported: 7/31/2025
 Last Payment Date: 7/2025

Balance: \$29,679
 Credit Limit: \$0
 High Credit: \$30,318
 Scheduled Payment: \$678
 Actual Payment: \$678
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: 75 Months
 Narrative Codes: Auto

Date Last Activity: 7/2025
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A

Months Reviewed: 06
 Date Closed:
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1						
2024												
2023												

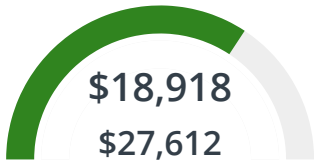
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INSTALLMENTS

BRIDGECREST CREDIT C 152AU11874

ACCOUNT NUMBER

11201972



Account Type: Auto
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 10/22/2022
 Date Reported: 7/31/2025
 Last Payment Date: 7/2025

Balance: \$18,918
 Credit Limit: \$0
 High Credit: \$27,612
 Scheduled Payment: \$648
 Actual Payment: \$550
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: 72 Months
 Narrative Codes: Auto

Date Last Activity: 7/2025
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A

Months Reviewed: 33
 Date Closed:
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1						
2024	1	1	1	1	1	1	1	1	1	1	1	1
2023							1	1	1	1	1	1

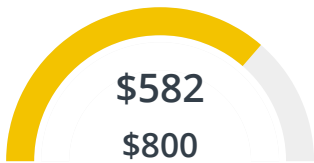
6

REVOLVING

CAPITAL ONE BANK USA 850BB01498

ACCOUNT NUMBER

51780598



Account Type: Credit Card
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 6/26/2024
 Date Reported: 8/18/2025
 Last Payment Date: 8/2025

Balance: \$582
 Credit Limit: \$800
 High Credit: \$1,285
 Scheduled Payment: \$25
 Actual Payment: \$0
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: N/A
 Narrative Codes: Credit Card, Amount In H/c Column Is Credit Limit

Date Last Activity: 8/2025
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A

Months Reviewed: 13
 Date Closed:
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1	1					
2024						*	1	1	1	1	1	1
2023												

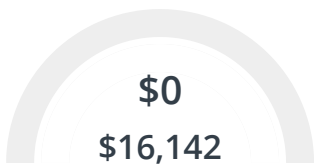
7

INSTALLMENTS

BRIDGECREST CREDIT C 152AU11874

ACCOUNT NUMBER

13100220



Account Type: Auto
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 5/18/2019
 Date Reported: 10/31/2022
 Last Payment Date: 10/2022

Balance: \$0
 Credit Limit: \$0
 High Credit: \$16,142
 Scheduled Payment: \$0
 Actual Payment: \$2,514
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Biweekly (Due Every 2 Weeks)
 Terms Duration: 46 Months
 Narrative Codes: Closed Or Paid Account/zero Balance, Auto

Date Last Activity: 10/2022
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A

Months Reviewed: 41
 Date Closed: 10/2022
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2022	1	1	1	1	1	1	1	1	1			
2021	1	1	1	1	1	1	1	1	1	1	1	1
2020										1	1	1

* Data Sourced By Equifax

End of Report Equifax and Affiliates - 9/10/2025

Equifax Information Services LLC,
P O BOX 740241, Atlanta, GA, 30374-0241,
1-888-EQUIFAX
www.equifax.com

Tosha Hewett

6230 Fay Blvd

Cocoa FL 32927

hewetttosha@yahoo.com

(321) 223-2106

Date: 8/7/2025

To Whom It May Concern,

I am writing this letter to offer my full recommendation for Giovanni Calderin, based on the excellent work he completed at my property.

From the initial consultation to the final installation, Giovanni demonstrated a high level of professionalism, transparency, and craftsmanship. He was attentive to my requests, clearly explained the process, and ensured that all necessary permits and codes were met without delay or confusion.

The quality of the materials used and the precision of the installation exceeded my expectations. Giovanni was particularly knowledgeable, responsive, and respectful throughout the project. His leadership and expertise were evident every step of the way.

It is clear that Giovanni values both the integrity of their work and the satisfaction of his clients. I am extremely pleased with the results and would confidently recommend him to anyone in need of fencing services!

Please feel free to contact me directly if you would like to discuss my experience further.

Sincerely,

A handwritten signature in black ink, appearing to read "T. Hewett". The signature is fluid and cursive, with a large initial "T" and a long, sweeping underline.

ASSOCIATED CREDIT REPORTING, INC.

Established 1985

7737 North University Drive, Suite 206, Tamarac, FL 33321
www.associatedcreditreporting.com

Telephone: 954-543-9400
Fax Number: 954-543-9411
Toll Free Telephone: 800-676-7640
Toll Free Fax Number: 800-235-7185

City of Fort Pierce
City Clerk's Office
100 North U.S. Highway 1
Fort Pierce, Florida 34950

September 10, 2025

Kevin Scott Delaney
Social Security Number: 280-68-6468

Credit History:

See enclosed credit report obtained from Equifax.

FICO Score: **742**

Public Record Search:

PUBLIC RECORDS HAVE BEEN CHECKED AT THE LOCAL, STATE AND FEDERAL LEVELS.

Search results: **CLEAR**

END OF REPORT

Response From Equifax*

Full Name: Kevin Delaney
SSN: [REDACTED]
File Pulled: 9/10/2025
User ID/Member Number: 403ZB00048
Date of Birth: 12/5/1972

Customer Inquiry

Customer Name: Kevin Delaney
Date of Birth: 12/5/1972
SSN: 280-68-6468
Address: 1463 New Found Harbor Dr, Merritt Island FL 32952
Customer Reference Number: ACRMATTHEW

Consumer Information*

Other Names: N/A
Current Address: 1463 Newfound Harbor Dr, Merritt Island FL 32952
Date Reported Address: 9/2/2025
Address Variance Indicator: N/A
Current Phone Number: N/A
Date Reported Phone: N/A

SSN Status: N/A
SSN Match Flags: N/A
Issue Date: N/A
Issue State: N/A
Death Date: N/A
Death State: N/A
Date File was Established: 6/26/1992
Date of Most Recent Activity: 9/9/2025

[View All Historical Consumer Information](#)

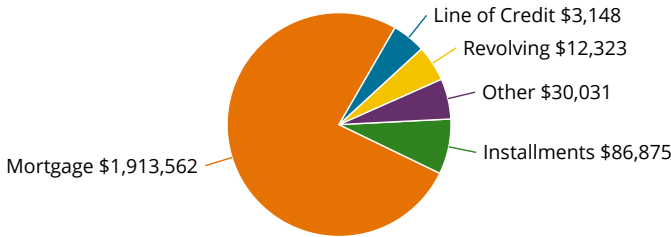
Alerts and Triggers*

Address Discrepancy Indicator

- No substantial difference occurred

[View All Alerts and Triggers Details](#)

Account Overview*



[View Trade Summary & Account Details](#)

Accounts Summary*

18

Revolving: 6
Installments: 8
Mortgage: 2
Line of Credit: 1
Other: 1
Length of Credit History: 18 years and 7 months
Average Account Age: 6 years and 3 months
Oldest Open Account: CITIMORTGAGE (2/16/2007)
Most Recent Account: UNION SAVINGS BANK (8/7/2025)

Last Reported Employment*

Occupation: N/A
Employer: Student
Date First Reported: 6/2024
Date Last Reported: 9/2025

FICO SCORE 10

742

- Time Since Most Recent Account Opening Is Too Short
- Lack Of Recent Revolving Account Information
- Length Of Time Revolving Accounts Have Been Established
- Lack Of Recent Bank/national Revolving Information

Model

Data Not Available

Potential Negative Info*

30 Day Delinquencies: 0
60 Day Delinquencies: 0
90 Day Delinquencies: 0
Bankruptcies: 0
Collections: 0

Recent Bankruptcy*

Date Filed: N/A
Type of Bankruptcy: N/A
Date Reported: N/A
Filer: N/A
Intent: N/A
Current Disposition Date: N/A
Industry Codes: N/A
Narrative Codes: N/A

[View All Bankruptcy Details](#)

3rd Party Collections*

Date Reported: N/A
Original Creditor Name: N/A
Creditor Classification Code: N/A
Status Code: N/A
Original Amount: \$0
Balance: \$0
Last Payment Date: N/A

[View All 3rd Party Collection Details](#)

Alerts and Triggers*

1. Address Discrepancy Indicator

- No substantial difference occurred
-

Consumer Statement

Data Not Available

Bankruptcy Details*

Data Not Available

3rd Party Collection Details*

Data Not Available

FICO SCORE 10

742

- Time Since Most Recent Account Opening Is Too Short
- Lack Of Recent Revolving Account Information
- Length Of Time Revolving Accounts Have Been Established
- Lack Of Recent Bank/national Revolving Information

Score Range: 300 - 850

Consumer Rank: 53%

Trades Summary & Account Status*

	Mortgage	Revolving	Installment	Line of Credit	Other
Total Accounts	2	6	8	1	1
Total w/ Balance	1	2	2	1	1
Total Balance	\$1,913,562	\$12,323	\$86,875	\$3,148	\$30,031
Scheduled Payments	\$9,911	\$122	\$3,007	\$75	\$0
Actual Payments	\$144,886	\$0	\$179,971	\$0	\$0
Oldest Date Opened	2/16/2007	10/6/2015	4/4/2014	8/7/2025	10/28/2019
Newest Date Reported	8/30/2025	8/22/2025	8/31/2025	8/30/2025	8/26/2025
Balloon Payment	\$0	\$0	\$0	\$0	\$0
Total Credit Limit	\$0	\$89,600	\$0	\$387,200	\$0
Total High Credit	\$2,000,000	\$52,947	\$140,842	\$0	\$51,446
Total Past Due	\$0	\$0	\$0	\$0	\$0
30 Days	0	0	0	0	0
60 Days	0	0	0	0	0
90+ Days	0	0	0	0	0
Utilization	N/A	14%	N/A	1%	N/A

Historical Consumer Information*

Address Reported	Date Reported	Status Reported
1463 Newfound Harbor Dr, Merritt Island, FL 32952	10/2018	Current
4869 Palm Coast Pkwy Nw Unit 3, Palm Coast, FL 32137	3/2/2025	Former
805 Fairway Dr, Las Vegas, NV 89107	2/29/2024	Additional
597 Haverty Ct Ste 40, Rockledge, FL 32955	2/2021	Additional
1180 Us Highway 1 Ste 103, Rockledge, FL 32955	11/2017	Additional
1160 Grand Cayman Dr, Merritt Island, FL 32952	4/2007	Additional
8932 Laguna Ln #403c, Cape Canaveral, FL 32920	12/2006	Additional
7071 Yankee Estates Dr, Excello, OH 45044	4/2005	Additional
7021 Wilhelmina Dr, Excello, OH 45044	10/2002	Additional
9500 Colgate Way, Hamilton, OH 45011	10/2001	Additional

Employment Information*

Last Reported Employment

Occupation: N/A
 Employer: Student
 Date First Reported: 6/2024
 Date Last Reported: 9/2025

Former Employer

Occupation: President
 Employer: Total Home Propertie
 Date First Reported: 6/2024
 Date Last Reported: 9/2025

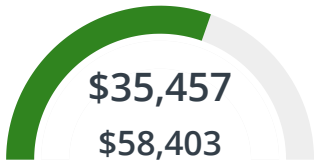
Credit Inquiries*

Data Not Available

Accounts*

1 INSTALLMENTS
SPACE COAST CU 846FC00042

ACCOUNT NUMBER
810001847



Account Type: Auto
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 11/14/2023
 Date Reported: 8/31/2025
 Last Payment Date: 8/2025
 Balance: \$35,457
 Credit Limit: \$0
 High Credit: \$58,403
 Scheduled Payment: \$1,390
 Actual Payment: \$1,390
 Past Due: \$0

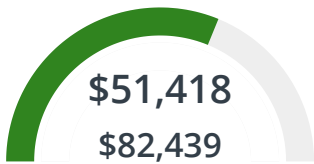
Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: 48 Months
 Narrative Codes: Auto, Fixed Rate

Date Last Activity: 8/2025
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A
 Months Reviewed: 21
 Date Closed:
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1	1					
2024	1	1	1	1	1	1	1	1	1	1	1	1
2023											1	1

2 INSTALLMENTS
SPACE COAST CU 846FC00042

ACCOUNT NUMBER
810001731



Account Type: Auto
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 6/22/2023
 Date Reported: 8/31/2025
 Last Payment Date: 8/2025
 Balance: \$51,418
 Credit Limit: \$0
 High Credit: \$82,439
 Scheduled Payment: \$1,617
 Actual Payment: \$1,617
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: 60 Months
 Narrative Codes: Auto, Fixed Rate

Date Last Activity: 8/2025
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A
 Months Reviewed: 26
 Date Closed:
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1	1					
2024	1	1	1	1	1	1	1	1	1	1	1	1
2023								1	1	1	1	1

3

LINE OF CREDIT

UNION SAVINGS BANK 636FS01171

ACCOUNT NUMBER

350601224



Account Type:	Home Equity Line of Credit	Balance:	\$3,148
Account Owner:	Individual Account	Credit Limit:	\$387,200
Rate/Status:	Pays account as agreed	High Credit:	\$0
Date Opened:	8/7/2025	Scheduled Payment:	\$75
Date Reported:	8/30/2025	Actual Payment:	\$0
Last Payment Date:		Past Due:	\$0

Charge Off Amount:	\$0	Date Last Activity:	8/2025	Months Reviewed:	
Deferred Payment Start:		Date Major First Delinquency Reported:		Date Closed:	
Terms Frequency:	N/A	Creditor Classification:	N/A	Balloon Payment Amount:	\$0
Terms Duration:	N/A	Original Creditor Name:	N/A	Balloon Payment Due Date:	

Narrative Codes: Home Equity, Line Of Credit, Amount In H/c Column Is Credit Limit, Variable/adjustable Rate

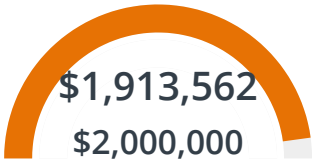
4

MORTGAGE

UNION SAVINGS BANK 636FS01171

ACCOUNT NUMBER

350241430



Account Type:	Conventional Real Estate Mortgage	Balance:	\$1,913,562
Account Owner:	Joint Account	Credit Limit:	\$0
Rate/Status:	Pays account as agreed	High Credit:	\$2,000,000
Date Opened:	11/8/2022	Scheduled Payment:	\$9,911
Date Reported:	8/30/2025	Actual Payment:	\$9,911
Last Payment Date:	8/2025	Past Due:	\$0

Charge Off Amount:	\$0	Date Last Activity:	8/2025	Months Reviewed:	33
Deferred Payment Start:		Date Major First Delinquency Reported:		Date Closed:	
Terms Frequency:	Monthly (Due Every Month)	Creditor Classification:	N/A	Mortgage ID Number:	
Terms Duration:	30 Years	Original Creditor Name:	N/A	Balloon Payment Amount:	\$0
				Balloon Payment Due Date:	

Narrative Codes: Real Estate Mortgage, Conventional Mortgage, Variable/adjustable Rate

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1	1					
2024	1	1	1	1	1	1	1	1	1	1	1	1
2023								1	1	1	1	1

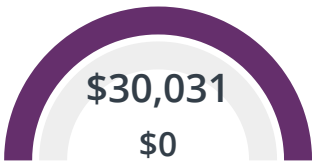
5

OTHER

AMERICAN EXPRESS 402BB48257

ACCOUNT NUMBER

349992753787



Account Type:	Credit Card	Balance:	\$30,031
Account Owner:	Individual Account	Credit Limit:	\$0
Rate/Status:	Pays account as agreed	High Credit:	\$51,446
Date Opened:	10/28/2019	Scheduled Payment:	\$0
Date Reported:	8/26/2025	Actual Payment:	\$0
Last Payment Date:		Past Due:	\$0

Charge Off Amount:	\$0	Date Last Activity:	8/2025	Months Reviewed:	69
Deferred Payment Start:		Date Major First Delinquency Reported:		Date Closed:	
Terms Frequency:	Monthly (Due Every Month)	Creditor Classification:	N/A	Balloon Payment Amount:	\$0
Terms Duration:	N/A	Original Creditor Name:	N/A	Balloon Payment Due Date:	

Narrative Codes: Credit Card

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1	1					
2024	1	1	1	1	1	1	1	1	1	1	1	1
2023								1	1	1	1	1

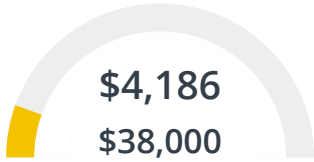
6

REVOLVING

ACCOUNT NUMBER

42669020

JPMCB CARD SERVICES 458ON13374



Account Type: Flexible Spending Credit Card **Balance:** \$4,186
Account Owner: Authorized User **Credit Limit:** \$38,000
Rate/Status: Pays account as agreed **High Credit:** \$25,728
Date Opened: 2/3/2018 **Scheduled Payment:** \$41
Date Reported: 8/22/2025 **Actual Payment:** \$0
Last Payment Date: 7/2025 **Past Due:** \$0

Charge Off Amount: \$0 **Date Last Activity:** 8/2025 **Months Reviewed:** 90
Deferred Payment Start: **Date Major First Delinquency Reported:** **Date Closed:**
Terms Frequency: Monthly (Due Every Month) **Creditor Classification:** N/A **Balloon Payment Amount:** \$0
Terms Duration: N/A **Original Creditor Name:** N/A **Balloon Payment Due Date:**
Narrative Codes: Flexible Spending Credit Card, Amount In H/c Column Is Credit Limit

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1	1					
2024	1	1	1	1	1	1	1	1	1	1	1	1
2023								1	1	1	1	1

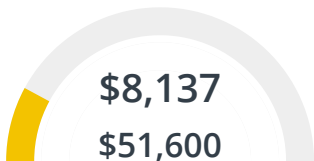
7

REVOLVING

ACCOUNT NUMBER

43885401

JPMCB CARD SERVICES 458ON13374



Account Type: Flexible Spending Credit Card **Balance:** \$8,137
Account Owner: Authorized User **Credit Limit:** \$51,600
Rate/Status: Pays account as agreed **High Credit:** \$27,219
Date Opened: 7/16/2022 **Scheduled Payment:** \$81
Date Reported: 8/15/2025 **Actual Payment:** \$0
Last Payment Date: 7/2025 **Past Due:** \$0

Charge Off Amount: \$0 **Date Last Activity:** 8/2025 **Months Reviewed:** 37
Deferred Payment Start: **Date Major First Delinquency Reported:** **Date Closed:**
Terms Frequency: Monthly (Due Every Month) **Creditor Classification:** N/A **Balloon Payment Amount:** \$0
Terms Duration: N/A **Original Creditor Name:** N/A **Balloon Payment Due Date:**
Narrative Codes: Flexible Spending Credit Card, Amount In H/c Column Is Credit Limit

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	1	1	1	1	1	1	1					
2024	1	1	1	1	1	1	1	1	1	1	1	1
2023								1	1	1	1	1

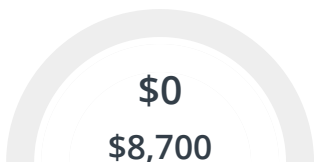
8

REVOLVING

ACCOUNT NUMBER

552393200534

TRUIST BANK 456ON00796



Account Type: Credit Card **Balance:** \$0
Account Owner: Joint Account **Credit Limit:** \$8,700
Rate/Status: Pays account as agreed **High Credit:** \$3,368
Date Opened: 5/5/2017 **Scheduled Payment:** \$0
Date Reported: 4/21/2025 **Actual Payment:** \$0
Last Payment Date: 6/2021 **Past Due:** \$0

Charge Off Amount: \$0 **Date Last Activity:** 6/2021 **Months Reviewed:** 95
Deferred Payment Start: **Date Major First Delinquency Reported:** 4/2025 **Date Closed:**
Terms Frequency: Monthly (Due Every Month) **Creditor Classification:** N/A **Balloon Payment Amount:** \$0
Terms Duration: N/A **Original Creditor Name:** N/A **Balloon Payment Due Date:**
Narrative Codes: Closed Or Paid Account/zero Balance, Account Closed Due To Inactivity, Credit Card, Amount In H/c Column Is Credit Limit

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2025	E	E	E									
2024	E	E	E	E	E	E	E	E	E	E	E	E
2023				E	E	E	E	E	E	E	E	E

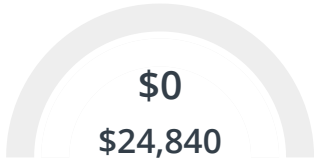
9

INSTALLMENTS

GOODLEAP LLC 236FZ01319

ACCOUNT NUMBER

230416



Account Type: Unsecured
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 10/5/2023
 Date Reported: 7/31/2024
 Last Payment Date: 4/2024

Balance: \$0
 Credit Limit: \$0
 High Credit: \$24,840
 Scheduled Payment: \$0
 Actual Payment: \$10
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: 216 Months
 Narrative Codes: Closed Or Paid Account/zero Balance, Account Assumed By Another Party, Fixed Rate, Unsecured

Date Last Activity: 4/2024
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A

Months Reviewed: 09
 Date Closed: 4/2024
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2024	1	1	1	1	*	*						
2023										1	1	1
2022												

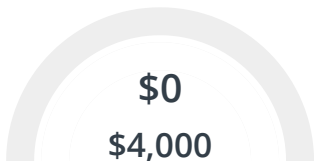
10

REVOLVING

BANK OF AMERICA 801ON00119

ACCOUNT NUMBER

440066363151



Account Type: Credit Card
 Account Owner: Authorized User
 Rate/Status: Pays account as agreed
 Date Opened: 9/16/2016
 Date Reported: 2/16/2024
 Last Payment Date: 8/2020

Balance: \$0
 Credit Limit: \$4,000
 High Credit: \$2,490
 Scheduled Payment: \$0
 Actual Payment: \$0
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: N/A
 Narrative Codes: Account Closed At Consumer's Request, Closed Or Paid Account/zero Balance, Credit Card, Amount In H/c Column Is Credit Limit

Date Last Activity: 8/2020
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A

Months Reviewed: 88
 Date Closed: 1/2024
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2024	E											
2023	E	E	E	E	E	E	E	E	E	E	E	E
2022		E	E	E	E	E	E	E	E	E	E	E

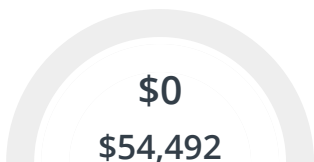
11

INSTALLMENTS

MERCEDES-BENZ FINANC 155FA04374

ACCOUNT NUMBER

500177690



Account Type: Auto Lease
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 12/21/2020
 Date Reported: 12/1/2023
 Last Payment Date: 11/2023

Balance: \$0
 Credit Limit: \$0
 High Credit: \$54,492
 Scheduled Payment: \$0
 Actual Payment: \$58,988
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: 36 Months
 Narrative Codes: Closed Or Paid Account/zero Balance, Auto, Lease, Fixed Rate

Date Last Activity: 11/2023
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A

Months Reviewed: 35
 Date Closed: 11/2023
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2023	1	1	1	1	1	1	1	1	1	1	1	
2022	1	1	1	1	1	1	1	1	1	1	1	1
2021												1

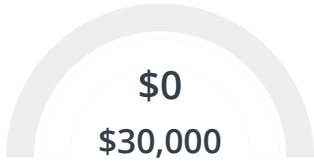
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REVOLVING

APPLE CARD - GS BANK 496BB25493

ACCOUNT NUMBER

110001112662



Account Type: Credit Card Balance: \$0
 Account Owner: Individual Account Credit Limit: \$30,000
 Rate/Status: Pays account as agreed High Credit: \$270
 Date Opened: 1/28/2020 Scheduled Payment: \$0
 Date Reported: 9/30/2023 Actual Payment: \$0
 Last Payment Date: 4/2021 Past Due: \$0

Charge Off Amount: \$0 Date Last Activity: 4/2021 Months Reviewed: 44
 Deferred Payment Start: Date Major First Delinquency Reported: 9/2023
 Terms Frequency: Monthly (Due Every Month) Creditor Classification: N/A Balloon Payment Amount: \$0
 Terms Duration: N/A Original Creditor Name: N/A Balloon Payment Due Date:
 Narrative Codes: Closed Or Paid Account/zero Balance, Account Closed Due To Inactivity, Credit Card, Amount In H/c Column Is Credit Limit

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2023	E	E	E	E	E	E	E	E				
2022	E	E	E	E	E	E	E	E	E	E	E	E
2021									E	E	E	E

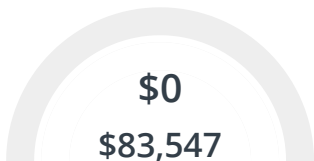
13

INSTALLMENTS

MERCEDES-BENZ FINANC 155FA04374

ACCOUNT NUMBER

500178174



Account Type: Auto Lease Balance: \$0
 Account Owner: Joint Account Credit Limit: \$0
 Rate/Status: Pays account as agreed High Credit: \$83,547
 Date Opened: 12/26/2020 Scheduled Payment: \$0
 Date Reported: 7/1/2023 Actual Payment: \$86,042
 Last Payment Date: 6/2023 Past Due: \$0

Charge Off Amount: \$0 Date Last Activity: 6/2023 Months Reviewed: 30
 Deferred Payment Start: Date Major First Delinquency Reported: 6/2023
 Terms Frequency: Monthly (Due Every Month) Creditor Classification: N/A Balloon Payment Amount: \$0
 Terms Duration: 36 Months Original Creditor Name: N/A Balloon Payment Due Date:
 Narrative Codes: Closed Or Paid Account/zero Balance, Auto, Lease, Fixed Rate

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2023	1	1	1	1	1	1						
2022	1	1	1	1	1	1	1	1	1	1	1	1
2021							1	1	1	1	1	1

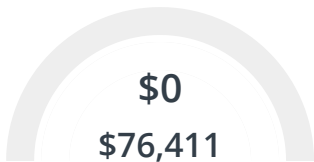
14

INSTALLMENTS

JPMCB AUTO FINANCE 404BB01370

ACCOUNT NUMBER

1172801531



Account Type: Auto Balance: \$0
 Account Owner: Individual Account Credit Limit: \$0
 Rate/Status: Pays account as agreed High Credit: \$76,411
 Date Opened: 10/7/2017 Scheduled Payment: \$0
 Date Reported: 2/8/2021 Actual Payment: \$29,790
 Last Payment Date: 1/2021 Past Due: \$0

Charge Off Amount: \$0 Date Last Activity: 1/2021 Months Reviewed: 39
 Deferred Payment Start: Date Major First Delinquency Reported: 1/2021
 Terms Frequency: Monthly (Due Every Month) Creditor Classification: N/A Balloon Payment Amount: \$0
 Terms Duration: 60 Months Original Creditor Name: N/A Balloon Payment Due Date:
 Narrative Codes: Closed Or Paid Account/zero Balance, Auto, Fixed Rate

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2021	1											
2020	1	1	1	1	1	1	1	1	1	1	1	1
2019		*	*	1	1	1	1	1	1	1	1	1

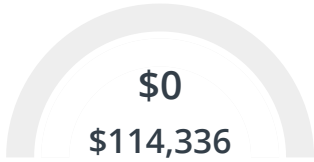
15

INSTALLMENTS

JPMCB AUTO FINANCE 404BB01370

ACCOUNT NUMBER

1191221749



Account Type: Auto
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 5/2/2019
 Date Reported: 1/19/2021
 Last Payment Date: 1/2021
 Balance: \$0
 Credit Limit: \$0
 High Credit: \$114,336
 Scheduled Payment: \$0
 Actual Payment: \$2,134
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: 60 Months
 Narrative Codes: Closed Or Paid Account/zero Balance, Auto, Fixed Rate
 Date Last Activity: 1/2021
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A
 Months Reviewed: 19
 Date Closed: 1/2021
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2021												
2020	1	1	1	1	1	1	1	1	1	1	1	1
2019					*	1	1	1	1	1	1	1

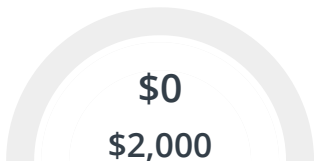
16

REVOLVING

BANK OF AMERICA 801ON00119

ACCOUNT NUMBER

440066256340



Account Type: Credit Card
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 10/6/2015
 Date Reported: 10/11/2019
 Last Payment Date: 12/2016
 Balance: \$0
 Credit Limit: \$2,000
 High Credit: \$1,274
 Scheduled Payment: \$0
 Actual Payment: \$0
 Past Due: \$0

Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: N/A
 Narrative Codes: Account Closed At Consumer's Request, Closed Or Paid Account/zero Balance
 Date Last Activity: 12/2016
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A
 Months Reviewed: 48
 Date Closed: 9/2019
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

YRS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2019	*	*	*	E	E	E	E	E	E			
2018	*	*	*	*	*	*	*	*	*	*	*	*
2017										*	*	*

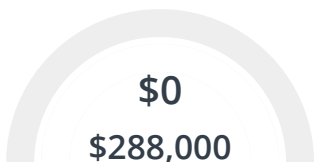
17

MORTGAGE

CITIMORTGAGE 906FM06418

ACCOUNT NUMBER

200414



Account Type: Conventional Real Estate Mortgage
 Account Owner: Individual Account
 Rate/Status: Pays account as agreed
 Date Opened: 2/16/2007
 Date Reported: 3/31/2019
 Last Payment Date: 3/2019
 Balance: \$0
 Credit Limit: \$0
 High Credit: \$288,000
 Scheduled Payment: \$0
 Actual Payment: \$134,975
 Past Due: \$0

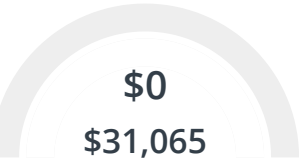
Charge Off Amount: \$0
 Deferred Payment Start:
 Terms Frequency: Monthly (Due Every Month)
 Terms Duration: 27 Years
 Narrative Codes: Closed Or Paid Account/zero Balance, Real Estate Mortgage, Loan Modified
 Date Last Activity: 3/2019
 Date Major First Delinquency Reported:
 Creditor Classification: N/A
 Original Creditor Name: N/A
 Months Reviewed: 99
 Date Closed: 3/2019
 Mortgage ID Number: 100011520041478548
 Balloon Payment Amount: \$0
 Balloon Payment Due Date:

18

INSTALLMENTS

ACCOUNT NUMBER

51765526



Account Type:	Auto	Balance:	\$0
Account Owner:	Individual Account	Credit Limit:	\$0
Rate/Status:	Pays account as agreed	High Credit:	\$31,065
Date Opened:	4/4/2014	Scheduled Payment:	\$0
Date Reported:	10/31/2017	Actual Payment:	\$0
Last Payment Date:	10/2017	Past Due:	\$0

Charge Off Amount:	\$0	Date Last Activity:	10/2017	Months Reviewed:	42
Deferred Payment Start:		Date Major First Delinquency Reported:		Date Closed:	10/2017
Terms Frequency:	Monthly (Due Every Month)	Creditor Classification:	N/A	Balloon Payment Amount:	\$0
Terms Duration:	60 Months	Original Creditor Name:	N/A	Balloon Payment Due Date:	
Narrative Codes: Closed Or Paid Account/zero Balance					

* Data Sourced By Equifax

End of Report Equifax and Affiliates - 9/10/2025

Equifax Information Services LLC,
P O BOX 740241, Atlanta, GA, 30374-0241,
1-888-EQUIFAX
www.equifax.com

ASSOCIATED CREDIT REPORTING, INC.

Established 1985

7737 N. University Drive, Suite 206, Tamarac, FL 33321
www.associatedcreditreporting.com

Telephone: 954-543-9400
Fax Number: 954-543-9411
Toll Free Telephone: 800-676-7640
Toll Free Fax Number: 800-235-7185

City of Fort Pierce
City Clerk's Office
100 North U.S. Highway 1
Fort Pierce, Florida 34950

September 3, 2025

Liberty Fencing Group Inc
292 Clearlake Road
Cocoa, Florida 32922
(386) 446-5110

Company incorporated in the state of Florida as a Florida Profit Corporation on 02/08/2024 and is active and current. Corporate name and principal address are registered as captioned above. Corporate mailing address is registered as 412 Bellaire Drive, Cocoa, Florida 32922.

Officers/Directors are shown as follows:

President: Giovanni Calderin – 494 S. Atlantic Ave #213, Cocoa Beach, FL 32931
SS# 596-48-8244
Ownership: 50%

Vice President: Kevin Delaney – 1463 Newfound Harbor Dr., Merritt Island, FL 32952
SS# 280-68-6468
Ownership: 50%

Registered Agent: Kevin Delaney – 1463 Newfound Harbor Dr., Merritt Island, FL 32952

FEI/EIN # 99-1228844. Company has 15 employees. Sales projections for 2025 are \$8,000,000.

PUBLIC RECORDS HAVE BEEN CHECKED AT THE LOCAL, STATE, AND FEDERAL LEVELS.

Search results: **CLEAR**

Qualifier: Giovanni Calderin – License # applied for

END OF REPORT



CONFIDENTIAL – Not for Public Release

Planning & Development Department
Licensing Regulation & Enforcement
2725 Judge Fran Jamieson Way
Building A, Room 114
Viera, Florida 32940
PH: 321-633-2058

Email: building.licensing@BrevardFL.gov

BOARD OF COUNTY COMMISSIONERS

August 26, 2025

Fort Pierce
Contractor Licensing Department
100 N US Hwy 1
Ft. Pierce, FL 34950

RE: Giovanni Calderin
Liberty Fencing Group Inc
292 Clearlake Rd.
Cocoa, FL 32922

COC # 24-FE-CT-00110

This is to certify that the above named applicant successfully passed the prepared, proctored and graded examination(s) indicated.

EXAM COMPANY	EXAM	DATE	SCORE
Prov Inc	Fencing Contractor	09/26/2024	84%
Prov Inc	Business and Law	09/25/2024	88%

The Certificate is currently: X Active Inactive Delinquent Pending
He was required to provide: 1 year(s) of experience in the trade.

Number of complaints: 0

Types of complaints: Technical 0 Consumer 0

	Yes	No
Fines	<u> </u>	<u> X </u>
Suspensions	<u> </u>	<u> X </u>
Revocations	<u> </u>	<u> X </u>
Other Action	<u> </u>	<u> X </u>
Probation	<u> </u>	<u> X </u>

Comments: Mr. Calderin was certified as a Fence Contractor in Brevard County on 10/23/2024. His record is in good standing.

Sincerely,

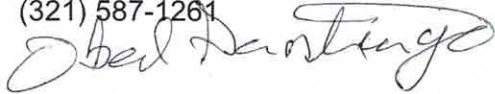
Kinga Ataman, Certification Specialist II
Brevard County Licensing Regulation & Enforcement

I am writing to highly recommend Giovanni Calderin. Giovanni recently replaced a portion of my fence, and I was extremely impressed with how professional he is and his skills. He was always quick at responding, communicated clearly to where I understood, and completed the work quickly. I will call him if I need any other fence projects completed at my home.

Regards,

Obed Santiago

(321) 587-1261

A handwritten signature in cursive script that reads "Obed Santiago". The signature is written in black ink and is positioned below the printed name and phone number.

Giovanni Calderin
August, 20 2025

X *Giovanni Calderin*



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Profit Corporation
LIBERTY FENCING GROUP INC

Filing Information

Document Number	P24000010154
FEI/EIN Number	99-1228844
Date Filed	02/08/2024
Effective Date	02/02/2024
State	FL
Status	ACTIVE

Principal Address

292 CLEARLAKE RD
COCOA, FL 32922

Changed: 08/07/2025

Mailing Address

412 BELLAIRE DR
COCOA, FL 32922 UN

Registered Agent Name & Address

DELANEY, KEVIN
1463 NEWFOUND HARBOR DR
MERRITT ISLAND, FL 32952

Officer/Director Detail

Name & Address

Title P

CALDERIN, GIOVANNI
494 S ATLANTIC AVE #213
COCOA BEACH, FL 32931 UN

Title VP

DELANEY, KEVIN
1463 NEWFOUND HARBOR DR
MERRITT ISLAND, FL 32952 UN

Annual Reports

Report Year	Filed Date
2025	03/11/2025

Document Images

[03/11/2025 -- ANNUAL REPORT](#)

[View image in PDF format](#)

[02/08/2024 -- Domestic Profit](#)

[View image in PDF format](#)

Terry Dourth

(321) 377- 4589

08/07/2025

Hello,

I just wanted to share my experience working with Giovanni Calderin because it was really great. He was friendly, showed up when he said he would, and got the job done without any issues. He explained things in a way I could understand and didn't make it complicated.

The fence turned out awesome and I'm really happy with how it looks. You can tell he knows what he's doing and actually cares about the work. I'd recommend him to anyone who needs a fence done right.

Sincerely,

Terry Dourth

A handwritten signature in black ink that reads "Terry Dourth". The signature is written in a cursive style with a large, prominent "D" and a long, sweeping underline.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/29/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Automatic Data Processing Insurance Agency, Inc. 1 Adp Boulevard Roseland NJ 07068		CONTACT NAME: Automatic Data Processing Insurance Agency, Inc. PHONE (A/C, No. Ext): 1-800-524-7024 FAX (A/C, No): E-MAIL ADDRESS:
INSURED Liberty Fencing Group, Inc. 412 Bellaire Dr Cocoa FL 32922		INSURER(S) AFFORDING COVERAGE INSURER A: Technology Insurance Company, Inc. NAIC # 42376 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 4455639

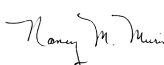
REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			TWC4537656	01/01/2025	01/01/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

Fort Pierce 100 N US Hwy 1 Fort Pierce FL 34950	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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