2024 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 04/25/2025

General Information

Name: Hon Jeffrey Layne Smith

PID 237093

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (2Nd)	Elected Constitutional Officer	Circuit Judge

Net Worth

My Net Worth as of January 22, 2025 was $ 2,058,023.00.

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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 $ 48,999.99.

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

Description of Asset	Value of Asset
Real property at 6026 Quail Ridge Dr., Tallahassee, FL 32312	$ 400,000.00
Stock in Capital Insulation, Inc. (closely held business)	$ 502,650.00
SEP IRA Jackson National Life Ins. Co. annuity	$ 264,040.00
After-tax Jackson National Life Ins. Co. annuity	$ 43,418.00
Northwestern Mutual Life Ins. Co. cash surrender values	$ 217,551.00
After-tax brokerage account with Hilltop Securities, Inc.	$ 93,042.00
Roth IRA	$ 43,035.00
SEP IRA with Hilltop Securities, Inc.	$ 40,411.00
2024 Ford Bronco Sport	$ 41,000.00
Deferred compensation with State of Florida	$ 165,867.00
State retirement pension contributions	$ 61,395.00
Regions Bank checking account	$ 5,084.00
Regions Bank savings account	$ 33,918.00
Prime Meridian Bank money market checking account	$ 39,549.00
Symbols for stocks, REITs, and E.T.F.s owned in investment accounts: META, GOOGL, AMZN, NBIS, NVDA, KO, WMT,NU, CHWY, SDVY, FRDAX, FDYNX, TMFC, PRJZX, ET, FXU, CPNG, PSTG, and TIPWX	$ 1,000.01
Tallahassee National Bank certificate of deposit	$ 57,063.00

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Liabilities

LIABILITIES IN EXCESS OF $1,000:

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

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

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
State of Florida	200 E. Gaines St., Tallahassee, FL 32399	$ 196,898.00
Allianz Life Ins. Co. annuity payment	P.O. Box 59060 Minneapolis, MN 55459	$ 16,707.31
Allstate Life Ins. Co. annuity payment	P.O. Box 758565, Topeka, KS 66675	$ 15,149.17

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			

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Interests in Specified Businesses

Business Entity # 1
N/A

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

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.

Jeffrey Layne Smith

Digitally signed: **04/25/2025**

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