2024 Form 1 - Statement of Financial Interests

Filed with COE: 05/21/2025

General Information

Name: Mr Zachary Brent Taylor

CONFIDENTIAL

PID 27660

AGENCY INFORMATION

Organization	Suborganization	Title
State Attorney; 14Th Circuit	Employees	Assistant State Attorney

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2024.

Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over $2,500) (Major sources of income to the reporting person)
(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
Manuel & Thompson, PA	314 Magnolia Avenue, Panama City, FL 32401	Legal Services
Office of State Attorney, 14th Circuit	421 Magnolia Avenue, Panama City, FL 32401	Legal

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Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (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
N/A			

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Location/Description
N/A

Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over $10,000)
(If you have nothing to report, write “none” or “n/a”)

Type of Intangible	Business Entity to Which the Property Relates
Regions Bank checking account	Regions Bank
Tyndall Federal Credit Union Savings account and CD	Tyndall
Florida Prepaid College Funds	Florida Prepaid and 529 plans

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Liabilities

LIABILITIES (Major debts valued over $10,000):
(If you have nothing to report, write “none” or “n/a”)

Name of Creditor	Address of Creditor
Toyota Finance	Toyota Finance
Infiniti Finance	Infiniti Finance

Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses)
(If you have nothing to report, write “none” or “n/a”)

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.

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Signature of Filer

Zachary Brent Taylor

Digitally signed: **05/21/2025**

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