

General Information

Name: Hon John Francis Martin

PID 249293

AGENCY INFORMATION

Organization	Suborganization	Title
Nassau County	Elected Constitutional Officer	County Commissioner District 1
Northeast Florida Regional Council	Board of Directors	Board Member

Net WorthMy Net Worth as of July 1, 2026 was \$ 3,027,340.01.

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.

The aggregate value of my household goods and personal effect is \$ 250,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Home: 2120 Highland St., Fernandina Bch, FL 32034	\$ 900,000.00
Bank Accts (Navy Federal Credit Union	\$ 56,403.21
Mutual Funds (Vanguard)	\$ 1,066,963.86
Mutual Funds & CD's (Edward Jones)	\$ 569,204.50
Life Insurance (Knights of Columbus)	\$ 50,000.00
Personal Loan to Orlando Avila	\$ 160,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
GM Financial	PO Box 183834, Arlington, TX 76096-3834	\$ 25,231.56

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

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 2025 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.

PRIMARY SOURCES OF INCOME:

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

Interests in Specified Businesses

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Training

This section applies only to a Constitutional or elected municipal officer, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

- ☒ I certify that I have completed the required training under Section 112.3142, F.S.
- ☐ Required training under Section 112.3142, F.S., not applicable to filer 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.

John Francis Martin

Digitally signed: 07/03/2026

Filed with COE: 07/03/2026