2024 Form 1 - Statement of Financial Interests

Filed with COE: 06/18/2025

General Information

Name: Mr Greg Sutton

PID 85536

AGENCY INFORMATION

Organization	Suborganization	Title
Jacksonville Beach	Mayor And City Council	Council Member, At Large, Seat 3

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
USAble Life/FCL/Florida Blue	4800 Deerwood Campus Pkwy Jacksonville, FL 32246	Insurance
City of Jax Beach	11 North 3rd Street Jax Beach, FL 32250	Municipality

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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
Stocks, Annuities	Fidelity Financial
Stocks, Annuities	NFP Financial
Stocks Annuities	Lincoln Financial
Common Stock	CSX Corporation
Common Stock	Southern Company

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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
N/A	

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	
Name of Business Entity	USAble Life (FLorida Blue)
Address of Business Entity	4800 Deerwood Campus Pkwy Jacksonville, FL 32246
Principal Business Activity	Insurance
Postion Held with Entity	Vice President
I own more than a 5% Interest in the Business	No
Nature of my Ownership Interest	n/a

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Training

This section applies only to an appointed school superintendent, an elected municipal officer, elected local officer of an independent special district or a commissioner of a community redevelopment agency created under Part III, Chapter 163, 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 Filer

Greg Sutton

Digitally signed: **06/18/2025**

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