

2025 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 08/20/2026

General Information

Name: Com Ronnie LaDell Moore

PID 11963

AGENCY INFORMATION

Organization	Suborganization	Title
CareerSource North Florida; Region 6	Board Members	
Madison County	Elected Constitutional Officer	County Commissioner District 3

Net Worth

My Net Worth as of December 31, 2025 was \$ 900,000.00.

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 \$ 60,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Farm located in Madison county 19-2N-08	\$ 323,960.00
Farm located in Madison County 13-2N-07	\$ 111,340.00
Farm located in Madison County 18-2N-08	\$ 127,178.00
C.H. Moore Family Trust in Madison County 18-2N-08 (1/5 ownership)	\$ 242,683.00
Farm located in Madison County	\$ 155,680.00
Farm located in Madison County 13-1N-07	\$ 394,000.00
Lot City of Madison 28-1N-09	\$ 3,020.00
Black Angus Cattle Herd	\$ 150,000.00
Parcel of land 2.5 acres	\$ 20,000.00
Individual Retirement Acct	\$ 315,000.00
Farm Equip	\$ 250,000.00

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Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Madison County Community Bank	P.O. Box 834 Madison, FL 32341	\$ 241,203.39
Ford Motor Credit	P.O. Box 650575 Dallas, TX 75265-0575	\$ 8,000.00
John Deere Financial	6400 NW 86th Street, P.O. Box 6600 Johnston, IA 50131	\$ 6,000.00
Wells Fargo	200 W Base St., Madison, FL	\$ 8,000.00

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 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.

☐ I elect to file a copy of my 2025 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
Madison County Community Bank	Director	\$ 13,250.00
Defense Finance and Accounting Service	U.S. Military Retired Pay 8899 E 56 St., Indianapolis IN. 46249	\$ 9,977.24
Townsend Livestock Market	P.O. Box 577 Madison, FL 32341	\$ 54,102.64
Merrill Lynch	P.O.Box 2150 Lakewood NJ 08701-8150	\$ 27,777.78
Madison County Clerk	P.O.Box 237 Madison, FL 32341	\$ 20,412.61
USDA	USDA FSA-CCC Madison County Office 1416 E US 90 Unit A Madison, FL 32340	\$ 1,642.66
Madison County Bankshares Corp	P.O.Box 834 Madison, FL	\$ 2,000.00
SSA	P.O.Box 67620 Wilkes-Barre, PA 18767-7620	\$ 34,068.00
FRS Div of Retirement	P.O.Box 9000 Tallahassee, FL 32316-9000	\$ 14,003.22

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			

Interests in Specified Businesses

Business Entity # 1	
Name of Business Entity	Madison County Community Bank
Address of Business Entity	301 E Base St., Madison, FL 32340
Principal Business Activity	Banking
Postion Held with Entity	Director
I own more than a 5% Interest in the Business	No
Nature of my Ownership Interest	Stockholder

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.

Ronnie LaDell Moore

Digitally signed: **08/20/2026**

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