2022 Form 6X - Amendment to Full and Public Disclosure of Financial Interests

Filed with COE: 07/31/2024

General Information

Name: Mr Michael Shawn Kemp

PID 288239

AGENCY INFORMATION

Organization	Suborganization	Title
Wakulla County	Elected Constitutional Officer	County Commissioner

CANDIDATE FOR

Position	Agency Name	Position sought or held
County Commission	Wakulla County	County Commissioner

Net Worth

My Net Worth as of December 31, 2022 was $ 155,143.00.

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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 $ 50,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

Description of Asset	Value of Asset
14 Blackberry Lane, Crawfordville, FL 32327	$ 400,000.00
2019 Chevy Truck	$ 45,000.00
2010 Harley–Davidson Motorcycle	$ 20,000.00
FSU Credit Union– Checking Acct	$ 1,691.00
Prime Meridian Bank–Checking	$ 5,452.00

Liabilities

LIABILITIES IN EXCESS OF $1,000:

Name of Creditor	Address of Creditor	Amount of Liability
PNC Bank	1PNC Plaza 249 5th, Pittsburgh, PA 15222	$ 217,000.00
Florida Commerce Credit Union	POBox 6216, Tallahassee 32314	$ 48,000.00
FSU Credit Union	POBox 182499, Tallahassee, FL 32318	$ 42,000.00
FSU Credit Union	POBox 182499, Tallahassee, FL 32318	$ 10,000.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

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Income

Identify each separate source and amount of income which exceeded $1,000 during the year, including secondary sources of income.

☐ I elect to file a copy of my 2022 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
FRS	POBox 9000, Tallahassee, FL 32315	$ 63,000.00
NWF Health Network	69 High Dr, Crawfordville, FL 32327	$ 78,500.00
Wakulla BOCC	3093 Crawfordville Hwy, Crawfordville, FL 32327	$ 38,500.00

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

Business Entity	Major Sources of Business Income	Address	Principal Business Activity of Source
N/A			

Interests in Specified Businesses

Business Entity # 1
N/A

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Training

☑ 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.

Amendment Reason

Explanation of changes why are you amending your previous form 6 submission?
Mathematical error in Net Worth which did not subtract Total Liabilities from Total Assets.

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6X and that the facts stated in it are true.

Michael Shawn Kemp

Digitally signed: **07/31/2024**

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