

2024 Form 6F - Final Full and Public Disclosure of Financial Interests

Filed with COE: 12/15/2024

General Information

Name: Hon Mike Cella

PID 96944

THE LAST DAY OF MY PUBLIC OFFICE OR POSITION WAS: 11/19/2024

AGENCY INFORMATION

Organization	Suborganization	Title
Clay County	Elected Constitutional Officer	Commissioner District 1

Net Worth

My Net Worth as of November 19, 2024 was \$ 836,545.00.

2024 Form 6F - Final Full and Public Disclosure of Financial Interests

Filed with COE: 12/15/2024

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 \$ 73,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
2019 Jeep Cherokee	\$ 14,000.00
2023 Mazda CX-30	\$ 31,000.00
Home Residence: 1630 Calming Water Drive, Fleming Island FL	\$ 395,000.00
Condo: 7500 N. Ocean Boulevard, Unit 6054, Myrtle Beach, SC 29572	\$ 166,479.00
Savings Account Bank Account: PNC Bank CR 220, Fleming Island, FL 32003	\$ 80,000.00
IRA: Exclusive Advisors	\$ 58,836.00
IRA: Real Estate Investment Trust- Inland Securities	\$ 7,000.00
Checking: PNC Bank CR 220 Fleming Island, FL	\$ 11,000.00
Bank Account: PNC Bank CR220 Fleming Island, FL	\$ 26,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Auto Loan: Mazda Financial Services	P.O. Box 74689, Chicago, IL 650575-4689	\$ 23,275.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income

Please complete the following statement identifying each separate source and amount of income which exceeded \$1,000 received during the period from January 1, 2024, through the last date you held the office or position, including secondary sources of income.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Clay County Board of Commissioners	477 Houston Street, GreenCove Springs, FL 32043	\$ 37,000.00
Social Security Administration	7185 Bonneval Road, Suite One, Jacksonville, FL 32256	\$ 30,453.00
Media Consulting	1630 Calming Water Drive, Fleming Island, FL 32003	\$ 2,000.00
Condo Rental Income	7500 N. Ocean Boulevard, unit 6054 Myrtle Beach, SC 29572	\$ 11,712.00

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

N/A

Signature of Reporting Official or Candidate

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

Mike Cella

Digitally signed: 12/15/2024

Filed with COE: 12/15/2024