

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

Filed with COE: 12/17/2024

General Information

Name: Mr Stacey Bryan Goodson

PID 244707

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

AGENCY INFORMATION

Organization	Suborganization	Title
Jackson County School Board	Elected Constitutional Officer	Board Member, District III

Net Worth

My Net Worth as of November 19, 2024 was \$ 1,328,201.00.

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, whether owned or leased.

The aggregate value of my household goods and personal effect is \$ 80,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Personal Residence 4724 Corner Stone Lane Marianna, FL 32446	\$ 194,201.00
1/2 Interest in residence 2136 HWY 73 Marianna, FL 32448	\$ 42,150.00
1/2 interest in 118 acres of land 2123 HWY 73 Marianna, FL 32448	\$ 59,000.00
Truist Bank Money Market and Checking Accounts Marianna, FL 32448	\$ 218,000.00
1/2 Interest in Regions Bank Checking Account Marianna, FL 32446	\$ 7,000.00
Edward Jones Account 4701 Us Hwy 90 Marianna, FL 32448	\$ 27,000.00
Nationwide Retirement Deferred Comp P.O. Box 182797 Columbus, OH 43218	\$ 531,000.00
Florida Prepaid College P.O. Box 6567 Tallahassee, FL	\$ 4,000.00
IRA Regions Bank Marianna, FL 32446	\$ 60,000.00
All In One Credit Union CD Marianna, FL	\$ 159,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Southeast Toyota Finance	P.O. Box 70832 Charlotte, NC 28272	\$ 11,000.00

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
Jackson County Board of County Commissioners	P.O. Drawer 510 Marianna, FL 32447	\$ 69,892.00
Jackson County School Board	2908 Jefferson Street Marianna, FL 32446	\$ 32,000.00

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.

Stacey Bryan Goodson

Digitally signed: 12/17/2024

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