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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Cary, CJ, L, Mr., / , , , N/A, C00720003		
(b) Address (number and street) 2520 N McMullen Booth Road Ste b405		☒ Check if address changed
(c) City, State, and ZIP Code Clearwater FL 33761		2. Candidate's FEC Identification Number P00013615
4. Party Affiliation REPUBLICAN PARTY		3. Is This Statement ☐ New (N) OR ☒ Amended (A)
5. Office Sought Presidential		6. State & District of Candidate 00

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) CJ L CARY (P.A.C.) POLITICAL ACTION COMMITTEE		
(b) Address (number and street) 576 N BIRDNECK ROAD SUITE 159		
(c) City, State, and ZIP Code VIRGINIA BEACH VA 23451		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) FHS-J.P.A.C (FOR HIS SAKE-JESUS POLITICAL ACTION COMMITTEE)		
(b) Address (number and street) 576 N BIRDNECK ROAD SUITE 159		
(c) City, State, and ZIP Code VIRGINIA BEACH VA 23451		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Cary, CJ, L, Mr., [Electronically Filed]	Date 03/19/2021
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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Optional Supplemental Page for Designation
of Additional Authorized CommitteesPage 2 of 2

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. **NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

CJ L Cary (P.A.C.) Political Action Committee

(b) Address (number and street)

2520 N McMullen Booth Rd
SUITE b405

(c) City, State, and ZIP Code

Clearwater

FL

33761

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. **NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

CJ P.A.C. Political Action Committee

(b) Address (number and street)

2520 N McMullen booth Rd
Ste b405

(c) City, State, and ZIP Code

Clearwater

FL

33761

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. **NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. **NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code