

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739315

**Entity Name:** ADVOCATES FOR THE RIGHTS OF THE CHALLENGED OF THE TREASURE COAST, INC.**FILED**  
**Feb 15, 2024**  
**Secretary of State**  
**8785222014CC****Current Principal Place of Business:**2001 SOUTH KANNER HWY  
STUART, FL 34994**Current Mailing Address:**2001 SOUTH KANNER HWY  
STUART, FL 34994 US**FEI Number: 59-6153484****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**MUNIZ, KEITH W  
2001 SOUTH KANNER HWY  
STUART, FL 34994 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PAST CHAIR  
Name KEMM, EDWARD  
Address 5002 T-REX AVENUE  
SUITE 225  
City-State-Zip: BOCA RATON FL 33431

Title PRESIDENT & CEO  
Name MUNIZ, KEITH  
Address 2001 S KANNER HWY  
City-State-Zip: STUART FL 34994

Title DIRECTOR  
Name BOYDEN, MARK  
Address 4007 SE JACARANDA STREET  
City-State-Zip: STUART FL 34997

Title DIRECTOR OF OPERATIONS  
Name SUAREZ, ALBERTO  
Address 2001 S. KANNER HIGHWAY  
City-State-Zip: STUART FL 34994

Title DIRECTOR  
Name SULLIVAN, DENNY  
Address 2750 SW MARTIN DOWNS BLVD  
City-State-Zip: PALM CITY FL 34990

Title COO  
Name SEXTON-WILLS, DANIELLE  
Address 2001 S. KANNER HWY  
City-State-Zip: STUART FL 34994

Title DIRECTOR  
Name HAIGH, ALEXANDER  
Address 210 SW ATLANTA AVENUE  
City-State-Zip: STUART FL 34994

Title CHAIRMAN  
Name EVE, TERRY  
Address 18380 SE WOOD HAVEN LANE C  
City-State-Zip: TEQUESTA FL 33469

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: KEITH W. MUNIZ****PRESIDENT & CEO****02/15/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name FRAIN, MICHAEL MR.  
Address 1752 SW CRANE CREEK CIRCLE  
City-State-Zip: PALM CITY FL 34990

Title DIRECTOR  
Name FLORA, FRANK  
Address 3662 SW 30TH AVENUE  
1  
City-State-Zip: PALM CITY FL 34990

Title DIRECTOR  
Name BOYD, CURTIS  
Address 500 US-1 NORTH  
City-State-Zip: FORT PIERCE FL 34950

Title TREASURER  
Name RYAN, JON  
Address P.O.BOX 739  
City-State-Zip: PALM CITY FL 34991

Title DIRECTOR  
Name GABRIEL, RANDEE  
Address 16609 78TH ROAD NORTH  
City-State-Zip: LOXAHATCHEE FL 33470

Title DIRECTOR  
Name BURGESS, PATRICIA A.  
Address 1278 NETTLES BLVD  
City-State-Zip: JENSEN BEACH FL 34957

Title CFO  
Name CREEDON, JERILYNN  
Address 2001 S. KANNER HIGHWAY  
City-State-Zip: STUART FL 34994