

**2025 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 06, 2025**  
**Secretary of State**  
**6063089975CC****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	COO
Name	SEXTON-WILLS, DANIELLE
Address	2001 S. KANNER HWY
City-State-Zip:	STUART FL 34994

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

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

Title	PRESIDENT & CEO
Name	MUNIZ, KEITH
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

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

**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****02/06/2025**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

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 STAPLETON, TIMOTHY  
Address 19925 CASTLEWOOD DRIVE  
City-State-Zip: JUPITER FL 33458

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

Title DIRECTOR  
Name PEDDICORD, CHRIS  
Address 2211 NW SEAGRASS DR.  
City-State-Zip: PALM CITY FL 34990