

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000001392

**Entity Name:** HERNANDO COUNTY RETIRED EDUCATORS ASSOCIATION, INC.

**FILED**  
**Mar 19, 2025**  
**Secretary of State**  
**6677821579CC**

**Current Principal Place of Business:**

6017 FOREST CREEK DRIVE  
BROOKSVILLE, FL 34601

**Current Mailing Address:**

6017 FOREST CREEK DRIVE  
BROOKSVILLE, FL 34601 US

**FEI Number: 81-2030159**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BERRY, EMILY  
4395 CALIQUEN DRIVE  
BROOKSVILLE, FL 34604 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            PRESIDENT  
Name            KELLEY, LINDA  
Address        407 NORTH LEMON AVENUE  
City-State-Zip: BROOKSVILLE FL 34601

Title            TD  
Name            SOLOMON, ALAN R  
Address        6017 FOREST CREEK DRIVE  
City-State-Zip: BROOKSVILLE FL 34601

Title            VP  
Name            KENNEDY, DIANE  
Address        1828 SOUTH HOYLAKE TERR.  
City-State-Zip: LECANTO FL 34461

Title            SECRETARY  
Name            TWYMAN, SHARON  
Address        14241 PULLMAN DRIVE  
City-State-Zip: SPRING HILL FL 34609

Title            TREASURER  
Name            SOLOMON, ALAN ROBERT  
Address        6017 FOREST CREEK DRIVE  
City-State-Zip: BROOKSVILLE FL 34601

*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: ALAN R SOLOMON**

**HCREA TREASURER**

**03/19/2025**

Electronic Signature of Signing Officer/Director Detail

Date