

2024 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/13/2025

General Information

Name: Hon Denise Rae Ferrero

CONFIDENTIAL

PID 24899

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (8Th)	Elected Constitutional Officer	

Net Worth

My Net Worth as of April 24, 2025 was \$ 3,401,928.50.

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 \$ 225,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
{REDACTED} Homestead property	\$ 629,000.00
Bank Accounts, Campus Credit Union, 800 SW Second Ave., Gainesville, FL	\$ 373,259.00
Fidelity {REDACTED} (joint) - Fidelity 500 Index Fund (FXAIX)	\$ 162,304.00

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Description of Asset	Value of Asset
Fidelity {REDACTED}(joint) - Berkshire Hathaway B (BRKB)	\$ 17,942.00
Treasury Direct - Series I Savings Bonds	\$ 22,312.00
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Treasury Direct - CUSIP 91282CGH8 5-year notes	\$ 10,000.00
Treasury Direct - CUSIP 91282CGE5 3-year notes	\$ 10,000.00
Treasury Direct - CUSIP 91282CFB2 5-year notes	\$ 10,000.00
ICMA MissionSquare {REDACTED}(401)-500 Stock Ind R5ex	\$ 151,960.00
ICMA MissionSquare {REDACTED}(RHS) 500 Stock Index S3	\$ 43,251.00
ICMA MissionSquare {REDACTED} (457) 500 Stock Index R5	\$ 600,211.00
VOYA retirement Insurance and Annuity Company, PO Box 990063, Hartford, CT 06199 Voya Fixed Account 457/401	\$ 65,071.83
VOYA retirement Insurance and Annuity Company, PO Box 990063, Hartford, CT 06199 Voya Intermediate Bond Fund R6	\$ 40,220.31
VOYA retirement Insurance and Annuity Company, PO Box 990063, Hartford, CT 06199 Voya, Fidelity 500 Index Fund	\$ 124,456.01
VOYA retirement Insurance and Annuity Company, PO Box 990063, Hartford, CT 06199 Voya, American Funds Growth Fund R6	\$ 288,475.95
VOYA retirement Insurance and Annuity Company, PO Box 990063, Hartford, CT 06199 Voya, Vanguard Sm-cap Val Index Fnd Inst	\$ 65,063.14
VOYA retirement Insurance and Annuity Company, PO Box 990063, Hartford, CT 06199 Voya, American Funds New Perspective R6	\$ 54,985.26
NassauRE Life Insurance Policy, Cash Value, One American Row, Hartford CT 06103	\$ 366,124.00
Florida Pre Paid College	\$ 45,548.00
IRA, Campus USA Credit Union	\$ 2,832.00
Treasury Direct - CUSIP 91282CEY3 3-year notes	\$ 10,000.00
Treasury Direct - CUSIP 91282CJW2 5-year notes	\$ 10,000.00
Treasury Direct - CUSIP 91282CHQ7 5-year notes	\$ 10,000.00
Treasury Direct - CUSIP 91282CHM6 3-year notes	\$ 10,000.00

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Description of Asset	Value of Asset
Fidelity {REDACTED}-bpsettledcash	\$ 1,601.00
Treasury Direct - CUSIP 91282CKX8-5-year notes	\$ 10,000.00
Treasury Direct - CUSIP 91282CMG3-5-year notes	\$ 10,000.00
Treasury Direct - CUSIP 91282CMH1-2-year notes	\$ 10,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2024 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2024 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
State of Florida	4050 Esplanade Way, Suite 235, Tallahassee, FL 32399	\$ 196,898.04

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

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Denise Rae Ferrero

Digitally signed: 06/13/2025

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