Filed with COE: 06/30/2026

General Information

Name: Mr Richard Dallis Hunter

PID 286885

AGENCY INFORMATION

Organization	Suborganization	Title
Hilliard	Mayor And Town Council	Council Member

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2025.

Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over $2,500) (Major sources of income to the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Name of Source of Income	Source's Address	Description of the Source's Principal Business Activity
Exterior Designs of North Florida, Inc	361770 Pine Street, Hilliard, FL 32046	Holiday Decorating
Life Safety Group, LLC	361770 Pine Street, Hilliard, FL 32046	Emergency Services Consulting

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Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write “none” or “n/a”)

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
Exterior Designs of North Florida, Inc	N/A	361770 Pine Street, Hilliard, FL 32046	Holiday Decorating
Life Safety Group, LLC	N/A	361770 Pine Street, Hilliard, FL 32046	Emergency Services Consulting

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write “none” or “n/a”)

Location/Description
N/A

Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over $10,000)
(If you have nothing to report, write “none” or “n/a”)

Type of Intangible	Business Entity to Which the Property Relates
Bank Account	Life Safety Group
Bank Account	Exterior Designs of North Florida

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Liabilities

LIABILITIES (Major debts valued over $10,000):
(If you have nothing to report, write “none” or “n/a”)

Name of Creditor	Address of Creditor
N/A	

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Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses)
(If you have nothing to report, write “none” or “n/a”)

Business Entity # 1	
Name of Business Entity	Exterior Designs of North Florida
Address of Business Entity	361770 Pine Street, Hilliard, FL 32046
Principal Business Activity	Holiday Decorating
Postion Held with Entity	President
I own more than a 5% Interest in the Business	Yes
Nature of my Ownership Interest	Owner
Business Entity # 2	
Name of Business Entity	Life Safety Group
Address of Business Entity	361770 Pine Street, Hilliard, FL 32046
Principal Business Activity	Emergency Management Consluting
Postion Held with Entity	President
I own more than a 5% Interest in the Business	Yes
Nature of my Ownership Interest	Owner

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Training

This section applies only to an appointed school superintendent, an elected municipal officer, elected local officer of an independent special district or a commissioner of a community redevelopment agency created under Part III, Chapter 163, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

☑ I certify that I have completed the required training under Section 112.3142, F.S.

☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

Signature of Filer

Richard Dallis Hunter

Digitally signed: **06/30/2026**

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