2025 Form 1 - Statement of Financial Interests

Filed with COE: 07/27/2026

General Information

Name: Mr Tradrick K McCoy

PID 242136

AGENCY INFORMATION

Organization	Suborganization	Title
Auditor General	Employees	Auditor

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
City of Riviera Beach	600 West Blue Heron Blvd. Riviera Beach, FL 33404	Government
State of Florida	111 Madison Street, Tallahassee, FL 32399	Government
Synergy Solutions Group LLC	2745 Broadway, Riviera Beach, FL 33404	Insurance and Legal Services
Perfect Professional Solutions	2745 Broadway, Riviera Beach, FL 33404	Accounting and Tax

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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
N/A			

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
N/A	

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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
Capital One	PO Box 30285 Salt Lake City, UT 84130-0285
Discover Card	P.O. Box 6103, Carol Stream, IL 60197
Nelnet/Sloan – US Department of Education	P.O. Box 87090 Lincoln, NE 68501
Direct Loans – US Department of Education	PO Box 1130 Fairfax, VA 322038

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
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.

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Signature of Filer

Tradrick K McCoy

Digitally signed: **07/27/2026**

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