2025 Form 1 - Statement of Financial Interests

Filed with COE: 08/31/2026

General Information

Name: Mr Derrick L Henry

PID 224063

AGENCY INFORMATION

Organization	Suborganization	Title
Daytona Beach	City Commission	Mayor
Daytona Beach	Community Redevelopment Agency	Chair

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
Volusia County Schools	200 N Clara avenue Deland fl 32724	Education

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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
1034 thunderbird Drive Daytona Beach Fl 32117

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
Retirement investment 457 B	Florida League of cities 301 S Broghnough S. Tallahassee Fl
Checking/ savings accounts	Launch Credit Union 2290 S. Ridgewood Av Daytona Beach Fl
Florida retirement System	Deferred Retirement Option Program Program State of Fl
Mutual Funds	Raymond James and Associates 444 sea breeze blvd Daytona beach Florida 32118
Florida prepaid college	Florida prepaid 529
ICMA 457 retirement account	ICMA Retirement Corporation Port St. Lucie fl 34953

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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
Irs	Internal Revenue Service P.O. Box 1214 charlotte NC 28201

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

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.

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Signature of Filer

Derrick L Henry

Digitally signed: **08/31/2026**

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