

2025 Form 6 - Full and Public Disclosure of Financial Interests

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DEPARTMENT OF STATE

Filed With COE: 04/02/2026

2026 APR -6 PM 1:20

General Information

Name: Hon Michael Scott Kraynick

CONFIDENTIAL

PID 279626

AGENCY INFORMATION

Organization

Suborganization

Title

Judicial Circuit (9Th)

Elected Constitutional Officer

Judicial Circuit (9Th)

Elected Constitutional Officer

Circuit Judge

CANDIDATE FOR

Position

Agency Name

Position sought or held

Circuit Judge

Ninth Judicial Circuit

Circuit Judge, Ninth Judicial Circuit,
Group 34

Net Worth

My Net Worth as of February 28, 2026 was \$ 2,624,316.86.

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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.

The aggregate value of my household goods and personal effect is \$ 83,258.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Homestead – CONFIDENTIAL PER CHAPTER 119	\$ 1,262,432.00
Bank Account - Wells Fargo Checking	\$ 100,014.17
Bank Account - Wells Fargo Savings	\$ 89,052.31
Bank Account - Wells Fargo Savings	\$ 45,034.09
Bank Account - American Express High Yield Savings Account	\$ 18,958.21
Bank Account - Addition Financial Checking	\$ 36,583.61
T. Rowe Price RETIREMENT I 2045 - I CL Fund TRPKX	\$ 278,559.52
Timeshare - Unit 301 Week 26 Of Coral Shores Condominium, 17030 Gulf Blvd, North Redington Beach, FL 33708	\$ 5,500.00
Life Insurance State Farm (Cash Surrender Value)	\$ 10,160.07
Life Insurance Nassau Life Insurance (Cash Surrender Value)	\$ 20,855.16
FRS 2045 Retirement Date Fund	\$ 269,096.77
Bank Account - Addition Financial Savings	\$ 2,009.55
Michael S Kraynick Irrevocable Trust	\$ 393,248.67

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		

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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 2025 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 2025 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 - For Year 2025	200 E Gaines Street, Tallahassee, Florida 32399-0356	\$ 139,227.86
State of Florida - As of Feb 28, 2026	200 E Gaines Street, Tallahassee, Florida 32399-0356	\$ 24,273.71
Barry University - For Year 2025	11300 NE 2nd Ave, Miami, FL 33161	\$ 30,727.17
WELLS FARGO CLEARING SERVICES, LLC - GOLDMAN SACH FINL SQUARE TREAS OBLIGS CLASS I FTOXX	2801 Market St, Saint Louis, MO 63103	\$ 1,175.94

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

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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.

Michael Scott Kraynick

Digitally signed: 04/02/2026

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