

HAND DELIVERED

2024 Form 6 - Full and Public Disclosure of Financial Interests

General Information		
Name:	Emily Gregory	
Organization	Suborganization	Title
N/A		
CANDIDATE FOR		
Position	Agency Name	Position sought or held
State Representative	Florida House of Representatives	District 87
Net Worth		
My Net Worth as of <u>October 28, 2025</u> was \$ <u>216,718.00</u> .		

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DEPARTMENT OF STATE
2025 NOV 13 AM 11:30
DIVISION OF ELECTIONS
TALLAHASSEE, FL

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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, whether owned or leased.

The aggregate value of my household goods and personal effect is \$ 20,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
	\$ 794,300.00
Florida Prepaid A - State of Florida	\$ 1,895.00
Florida Prepaid B - State of Florida	\$ 1,732.00
Florida Prepaid C - State of Florida	\$ 1,619.00
XOM EXXON MOBIL CORP	\$ 4,510.00
GBTC GRAYSCALE BITCOIN TRUST	\$ 2,693.10
RSP INVSC S P 500 EQUAL	\$ 4,308.93
TARK TRADR 2X LONG INNOVATION	\$ 5,747.00
SMH VANECK SEMICONDUCTOR	\$ 5,221.76
VGT VANGUARD INFORMATION	\$ 11,946.08
EG Fitness, LLC dba FIT4MOM PALM BEACH	\$ 12,500.00
USAA Checking	\$ 5,822.00

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Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
aidVantage (Student Loan)	PO Box 30001, Greenville, TX 75403	\$ 114,188.79
Colonial Savings FA (Mortgage)	PO Box 2988, Fort Worth, TX 76113	\$ 544,119.20

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
EG Fitness LLC, dba FIT4MOM PALM BEACH	244 New Haven Blvd, Jupiter FL 33458	\$ 4,339.00

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			

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Interests in Specified Businesses

Business Entity # 1

N/A

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.

Emily Gregory

Digitally signed: 11/05/2025