STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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2021 SEP 16 PM 12: 22

MANATEE COUNTY SUPERVISOR OF ELECTIONS

Full Name of Committee Better Beach Alliance, Inc.	Telephone 850-212-0226							
Mailing Address (include city, state and zip code) 104 34th Street, Holmes Beach, Florida 34217								
Street Address (include city, 104 34th Street, Holmes E	·							
2. Affiliated or Connected Or committees)	ganizations (includes other committees of con	tinuous ex	istence and political					
Name of Affiliated or Connected Organization	Mailing Address		Relationship					
N/A								
3. Area, Scope and Jurisdiction of the Committee Political committee to support or oppose local, county referenda and other activities not prohibited by Chapter 106, Florida Statutes.								
4. Nature of Organization or O	Organization's Special Interest (e.g., medical, l	egal, educ	ation, etc.)					
5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)								
Full Name	Mailing Address	Committee Title or Position						
Noreen A. Fenner	1103 Hays Street Tallahassee, Florida 32301	Treasure	er					

6. List by Name, Address and Position, Other Principal Officers, Including Officers and Records of the Finance Committee, If Any (include chairman's name)								
Full Name	Mailing Add	Mailing Address		Ognomittee Title or Position				
Jessica Cooper	104 34th Street Holmes Beach, Florida	104 34th Street Holmes Beach, Florida 34217		Chair MANATEE COUNTY SUPERVISOR OF ELECTIONS				
7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate)								
Full Name	Mailing Address	Office Sought			Party			
N/A								
8. List Any Issues this Committee is Supporting: To be determined List Any Issues this Committee is Opposing: To be determined								
9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party N/A								
10. In the Event of Dissolution, What Disposition will be Made of Residual Funds? Contribute to charitable organizations or as otherwise provided by law.								
11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds								
Name of Bank or Depository & Account Number		Mailing Address						
SunTrust Bank		3522 Thomasville Road Tallahassee, Florida 32309						
12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any								
Report Title	Dates Required to be Filed	Name & Position of	of Official	М	ailing Address			
Form 8976, Form 1120POL, Form 990, as may be required	Upon formation, March 15, annually, May 15, annually	Internal Revenu Service	e 	Ogden	, UT 84201			
STATE OF Florida		Hills pouragh county						
Jessica Cooper , certify that the information in this Statement of Organization is complete, true and correct.								
X Jessie Cooper 11/14/2021 Signature of Chairman of Political Committee Date								