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**STATEMENT OF ORGANIZATION  
OF POLITICAL COMMITTEE**

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2005 DEC 20 AM 11:02

(PLEASE TYPE)

MIAMI-DADE  
ELECTIONS

**1. Full Name of Committee**

CITIZENS AGAINST THE ANNEXATION TO SWEETWATER

Date

12/20/2005

Mailing Address (if post office box or drawer, please add street address)

7220 NW 36 STREET, SUITE 637

Telephone

(305 ) 715-9000

City

MIAMI

County

MIAMI-DADE

State

FL

Zip Code

33166

**2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)**

Name of Affiliated or  
Connected Organization

Mailing Address

Relationship

N/A

N/A

N/A

**3. Area, Scope and Jurisdiction of the Committee**

MIAMI-DADE COUNTY ISSUES

**4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)**

PRESERVE THE WELL BEING OF THE RESIDENTS OF UNINCORPORATED MIAMI-DADE  
COUNTY BY OPPOSING THE ANNEXATION TO THE CITY OF SWEETWATER.

**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

JAVIER J. HERMIDA

7220 NW 36 STREET  
SUITE 637  
MIAMI, FL 33166

TREASURER

**6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)**

Full Name	Mailing Address	Committee Title or Position
TERESITA MONTANARO	28 NW 109 PLACE MIAMI, FL 33172	CHAIRMAN

**7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting**

Full Name	Mailing Address	Office Sought	Party
N/A	N/A	N/A	

**8. List Any Issues this Committee is Supporting:** NON-ANNEXATION OF UNINCORPORATED MIAMI-DADE COUNTY TO SWEETWATER  
**List Any Issues this Committee is Opposing:** ANNEXATION OF UNINCORPORATED MIAMI-DADE COUNTY TO SWEETWATER

**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?**

LEFTOVER RESIDUAL FUNDS WILL BE DONATED TO QUALIFIED NON-PROFIT ORGANIZATIONS.

**11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds**


Name of Bank or Depository & Account Number	Mailing Address
INTERCONTINENTAL BANK ACCOUNT: 01128264	5722 SW 8 STREET MIAMI, FL 33144

**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 Official	Mailing Address
N/A	N/A	N/A	N/A

STATE OF FLORIDA MIAMI-DADE COUNTY

I, TERESITA MONTANARO, certify that the information in this Statement of Organization is complete, true and correct.

**X** 

Signature of Chairman of Political Committee

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 ELECTIONS  
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MIAMI-DADE  
ELECTIONS

STATE OF FLORIDA  
APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR POLITICAL COMMITTEES  
AND ELECTIONEERING COMMUNICATION  
ORGANIZATIONS  
(Sections 106.011(1) & 106.021(1), F.S.)  
(PLEASE TYPE)

CHECK APPROPRIATE BOX:

Original Appointment     Deputy Treasurer     Reappointment of Treasurer     Secondary Depository

1. Committee or Electioneering Communication Organization Name  
CITIZENS AGAINST THE ANNEXATION TO SWEETWATER

2. Mailing Address  
7220 NW 36 STREET  
SUITE 637

Telephone (optional)    3. City    4. County    5. State    6. Zip Code  
305-715-9000    MIAMI    MIAMI-DADE    FL    33166

The following person has been appointed to serve as  Campaign Treasurer     Deputy Treasurer    for the above named committee.

7. Name of Treasurer or Deputy Treasurer  
JAVIER J. HERMIDA

8. Street Address  
7220 NW 36 STREET, SUITE 637

9. City    10. County    11. State    12. Zip Code  
MIAMI    MIAMI-DADE    FL    33166

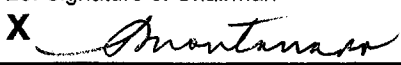
I have designated the following named bank as my  Primary Depository     Secondary Depository

13. Bank Name (include account number)  
INTERCONTINENTAL BANK

14. Street Address  
5722 SW 8 STREET

15. City    16. County    17. State    18. Zip Code  
MIAMI    MIAMI-DADE    FL    33144

19. Name of Chairman  
TERESITA MONTANARO

20. Signature of Chairman  
*X* 

**Campaign Treasurer's Acceptance of Appointment**

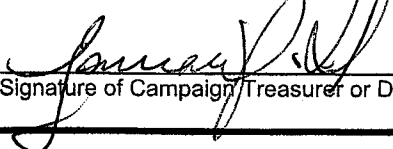
I, JAVIER J. HERMIDA, do hereby accept the appointment as  
(Please Print or Type)

Campaign Treasurer     Deputy Treasurer    for the CITIZENS AGAINST THE ANNEXATION TO SWEETWATER

Committee or Organization. As a duly registered voter in MIAMI-DADE County, Florida, I am  
qualified to accept this appointment.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S  
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

12-20-05  
Date

*X*   
Signature of Campaign Treasurer or Deputy Treasurer

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STATE OF FLORIDA  
APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR POLITICAL COMMITTEES  
AND ELECTIONEERING COMMUNICATION  
ORGANIZATIONS  
(Sections 106.011(1) & 106.021(1), F.S.)  
(PLEASE TYPE)

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2005 DEC 20 AM 11:32

MIAMI-DADE  
ELECTIONS

CHECK APPROPRIATE BOX:

Original Appointment     Deputy Treasurer     Reappointment of Treasurer     Secondary Depository

1. Committee or Electioneering Communication Organization Name  
*CITIZENS AGAINST THE ANNEXATION TO SWEETWATER*

2. Mailing Address  
*7220 N.W. 36 ST  
SUITE 637*

Telephone (optional)    3. City    4. County    5. State    6. Zip Code  
*305-715-9000    MIAMI    MIAMI-DADE    FL    33166*

The following person has been appointed to serve as  Campaign Treasurer     Deputy Treasurer    for the above named committee.

7. Name of Treasurer or Deputy Treasurer  
*MIGDALIA VAZQUEZ*

8. Street Address  
*7220 N.W. 36 ST. SUITE 637*

9. City    10. County    11. State    12. Zip Code  
*MIAMI    MIAMI-DADE    FL    33166*

I have designated the following named bank as my  Primary Depository     Secondary Depository

13. Bank Name (include account number)  
*INTERCONTINENTAL BANK*

14. Street Address  
*5722 SW 8 ST*

15. City    16. County    17. State    18. Zip Code  
*MIAMI    MIAMI-DADE    FL    33144*

19. Name of Chairman  
*TERESITA MONTANARO*

20. Signature of Chairman  
*X Montanaro*

Campaign Treasurer's Acceptance of Appointment

I, *MIGDALIA VAZQUEZ*, do hereby accept the appointment as  
(Please Print or Type)

Campaign Treasurer     Deputy Treasurer    for the *CITIZENS AGAINST THE ANNEXATION TO SWEETWATER*  
Committee or Organization. As a duly registered voter in *MIAMI-DADE* County, Florida, I am

qualified to accept this appointment.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S  
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

*12-20-06*    Date    *X Migdalen Vazquez*    Signature of Campaign Treasurer or Deputy Treasurer