# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

1. Full Name of Committee

OFFICE USE ONLY

2014 FEB - 3 PM 1: 16

MIAMI-DADE ELECTIONS

Telephone

North Central Miami Dad			
Mailing Address (include city 9101 nw 7th Ave., B2 Miami, Florida 33150	nd - Statement in No. 1 (ab. 17 Arm 1900		
Street Address (include city, 9101 nw 7th Ave., Miam			
2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)			
Name of Affiliated or Connected Organization	Mailing Address		Relationship
NONE		in in the second	
3. Area, Scope and Jurisdict North Central Miami Dade			
To politically organizing fu	Organization's Special Interest (e.g., medical, I undraising, to support efforts to Incorporat and empowering the residence as legal v	e the North	
5. Identify by Name, Address	and Position, the Custodian of Books and Ac	counts (inclu	de treasurer's name)
Full Name	Mailing Address	Commit	tee Title or Position
Keturah Dirosier	9101 nw 7th Ave., B21 Miami, Florida 33150	Treasurer	

	nd Position, Other Principal ( ny (include chairman's name		Officers and Mem	bers of the
Full Name	Mailing Address		Committee Title or Position	
Mark Gardner Keturah Dirosier	9101 nw 7th Ave. B21 Miami, Florida 33150 same		Chairperson Treasurer	-
7. List by Name, Address, ( Committee is Supporting	Office Sought and Party Affili g (if none, please indicate)	ation Each Candida	te or Other Indiv	idual that this
Full Name	Mailing Address Office Sought Page 1		Party	
None				
8. List Any Issues this Com	mittee is Supporting: INCO	RPORATION		20
List Any Issues this Com	mittee is Opposing: N/A		ELEC	THE THE
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?				
10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?  Funds will be given to a non-profit organization, or be given back to contributors at a prorated rate with a 30 day window.				
11. List all Banks, Safety D	eposit Boxes, or Other Depos	sitories Used for Co	mmittee Funds	
Name of Bank or Depository & Account Number Mailing Address				
Wells Fargo	9301 nw 7th Ave. Miami, Florida 33150			
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	f Official M	lailing Address
NONE				
STATE OF Florida		Miami Da	ade	COUNTY
I, Dr. Mark Gardner	3117-3	, certify that the ir	nformation in this S	Statement of
Organization is complete, true  X Signature of Ch	e and correct.	<del></del>	2/3/20 Da	/ 4

#### **APPOINTMENT OF CAMPAIGN TREASURER** AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR POLITICAL COMMITTEES**

(Sections 106.011(1) and 106.021(1), F.S.)

### RECEIVED

2014 FEB - 3 PM 1: 17

MIAMI-DADE ELECTIONS

CHECK APPROPRIATE BOX:			OFFICE USE ONLY
Original Appointment of Treasurer Reappoin	ntment of Treasurer		Deputy Treasurer
1. Committee or Organization		2. Telephone	
North Central Miami Dade Action Committee		( )	
Name of Treasurer or Deputy Treasurer     4. Email (optional)	1)	5. Telephone (o	optional)
Keturah Dirosier northcentralmiami.inco	orporate@yahoo.c	( )	
6. Mailing Address 9101 nw 7th Ave B21			
7. Street Address		1	
Miami, Florida 33150			
8. The following bank has been designated as the Prin	mary Depository	Seconda	ry Depository
9. Name of Bank	10. Street Address	<b>3</b>	
Wells Fargo	9301 nv	v 7th Ave	<b>.</b>
11. City	12. State	<b>3</b>	13. Zip Code
Miami	Flor	ida	33150
14. Signature of Chairman	Dr. Mark Gardner		**************************************
Campaign Treasurer's Acceptance of Appointment			
Keturah Dirosier	Ceptance of A	1991 - 97	m en man e
(Please Print or Type)		, do hereb	by accept the appointment as
treasurer or deputy treasurer for North Central Miami Dade Action Committee			
	(Committee or Organiz	zation)	
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.			
2-3-2014 x	Tolena	A Dinge	219
Date	Signature of Campa	algn Treasurer or I	Deputy Treasurer

#### **REGISTERED AGENT** STATEMENT OF APPOINTMENT

(Section 106.022, F.S.)

#### OFFICE USE ONLY

(500.011 100.022,11.0.)		2014	1 FEB - 3 PM 1: 17
			MIAMILIDADE
Original Appointment Change of Appointment			MIAMI-DADE ELECTIONS
Change of Mailing Address Change of Physical Address			
Registered Ag	ent and Of	fice Information	on
Name Mark Gardner			Telephone
Street Address 9101 nw 7th Ave. B21			
City Miami	State Florida		Zip Code 33150
Mailing Address Same			
City same	State		Zip Code
I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.  2-3-2014			
Signature of Registered Agent		Date	/17
Former Registered Agent a	nd Office I	nformation (fo	r changes only)
Name			Telephone
Street Address	· · · · · · · · · · · · · · · · · · ·	N = " W".	
City	State		Zip Code
Committee or Organization Information			
Name of Committee or Organization	- grans		
North Central Miami Dade Action Con	nmittee		
Street Address 9101 nw 7th Ave. B21	Y		Telephone
City Miami	State Florida		Zip Code 33150.
Mould Gorden Signature of Chairperson		_	
Dr. Mark Gardner		2-3-20	14
Printed Name of Chairperson		Date	

RECEIVED



# Access to Handbook and the Election Laws of the State of Florida FEB - 3 PM 1: 16

		MIAMI-DADE ELECTIONS
Candidate/Chairperson:		ELECTIONS
Mark	Anthony	Gardner
First Name	Middle Name	Last Name
North Central Mia	mi Dade Action Co	ommittee
	Office Sought / Organizat	ion
	in the following resource	ad, understand and follow th s available on the Miami-Dad
Contains information o Florida, County Laws a	n State Laws and Handbooks, and Handbooks, Qualifying Info	nde.gov/elections/candidate.asp) the Election Laws of the State of formation, Electronic Reporting Dates and Recent Legislative Changes.
Contains information o Florida, County Laws a	· '아들' 그리고 프라바닷컴, 아이스 아는 것들었습니? 이번 하는 사람들이 아버지에 있는 것은 그 아이라겠다니 않는 이어 느꼈다면 이렇게 하다면 다른 사람이 아니라.	the Election Laws of the State of porting Dates and Procedures,
Acknowledged by:	Mark God Candidate / Chairpers	on Signature
Primary Telephone Num	ber:	
Alternate Telephone Nur	mber:	
E-mail address:	entralmiami.incorporate@	/ahoo.com

### Campaign Treasurer's Report Miami-Dade County Electronic Filing Requirements IVED

□ Candidate (office sought):	2014 FEB - 3 PM 1: 17
Candidate's Florida Voter Registration Number:	MIAMI-DADE
Political Committee: North Central Miami T	FIFELIONS
□ Party Executive Committee:	
□ Other:	
I, Dr. Mark Anthony Gardner (Please print name of Candidate or Chairperson)	
understand that Campaign Treasurer's Reports must be file	ed electronically via the
Supervisor of Elections website by midnight of the day design	nated in order to comply
with Miami-Dade County requirements. I also acknowledge tha	
21 of the Code of Miami-Dade County regarding the filing of	, 0
reports with the Supervisor of Elections were recently amended hardcopies are no longer required.	ed in that original signed
nardcopies are no longer required.	
I also understand that, in accordance with Section 12-14.1 of	the Code of Miami-Dade
County, Florida, candidates running for the Offices of Mian	mi-Dade County Mayor,
Commissioner, Property Appraiser, Clerk of the Circuit Courts,	and Community Council
must now file the Absentee Ballot Campaign Report (MD-ED 2	6) to disclose the names
of paid campaign workers engaged in absentee ballot activities.	
Male Garde	2-3-2014
Signature of Candidate or Chairperson	Date
Day Time Telephone Number:	
Alternate Contact Number:	
Email Address: north central miami. in corpora	atel Jahoo.com

This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository form is filed.