

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

**1. Full Name of Committee**  
Miami Dade Citizens For Progress

Telephone  
305-647-2666

Mailing Address (include city, state and zip code)  
6619 S. Dixie Hwy No. 148  
Miami, FL 33143

Street Address (include city, state and zip code)  
6619 S. Dixie Hwy No. 148  
Miami, FL 33143

**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 - to support or oppose candidates for county and municipal office and other activities allowed under Florida election law.

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

Political - educate and advocate based on candidate positions on issues

**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
Gloria Maggiolo	6619 S. Dixie Hwy No. 148 Miami, FL 33143	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
Dennis C. Moss	17125 SW 109 Court Miami, FL 33157	Chairperson
Gloria Maggiolo	6619 S. Dixie Hwy No. 148 Miami, FL 33143	Treasurer

**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
TBD			

**8. List Any Issues this Committee is Supporting:** TBD

**List Any Issues this Committee is Opposing:** TBD

**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?**  
Any activities allowed under Florida law for disposal of residual funds.

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

Name of Bank or Depository & Account Number	Mailing Address
BB&T	6202 S. Dixie Hwy Miami, FL 33143

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**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
SS4 Form 8871	Upon Formation Upon Formation	IRS IRS	Ogden, UT 84201 Ogden, UT 84201

STATE OF Florida Miami-Dade COUNTY

I, Dennis C. Moss, certify that the information in this Statement of

Organization is complete, true and correct.

**X**   
Signature of Chairman of Political Committee

2/9/21  
Date

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR  
POLITICAL COMMITTEES**  
(Sections 106.011(2) and 106.021(1), F.S.)

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**CHECK APPROPRIATE BOX:**

Initial Filing for:  Primary Treasurer  Deputy Treasurer

Re-filing to Change:  Primary Treasurer  Deputy Treasurer  Primary/Secondary Depository

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1. Committee  
Miami Dade Citizens For Progress

2. Telephone  
(305 ) 647-2666

3. Name of Treasurer or Deputy Treasurer  
**Gloria Maggiolo**

4. Email (optional)  
gloria@bffcompliance

5. Telephone (optional)  
(305 ) 647-2666

6. Mailing Address  
6619 S. Dixie Hwy No. 148, Miami, FL 33143

7. Street Address  
6619 S. Dixie Hwy No. 148, Miami, FL 33143

8. The following bank has been designated as the  **Primary Depository**  **Secondary Depository**

9. Name of Bank  
BB&T

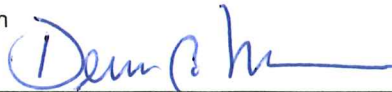
10. Street Address  
6202 S. Dixie Hwy

11. City  
Miami

12. State  
FL

13. Zip Code  
33143

14. Signature of Chairman



15. Name of Chairman (Print or Type)  
Dennis C. Moss

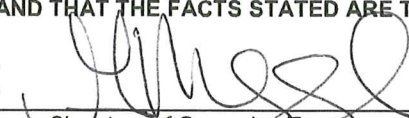
**Campaign Treasurer's Acceptance of Appointment**

I, **Gloria Maggiolo**, do hereby accept the appointment as  
(Please Print or Type)

treasurer or deputy treasurer for Miami Dade Citizens For Progress  
(Committee)

**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.**

2/3/2021  
Date

  
Signature of Campaign Treasurer or Deputy Treasurer



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**REGISTERED AGENT  
STATEMENT OF APPOINTMENT**  
(Section 106.022, F.S.)

- Original Appointment
- Change of Appointment
- Change of Mailing Address
- Change of Physical Address

**Registered Agent and Office Information**

Name  
**Gloria Maggiolo** Telephone  
305-647-2666

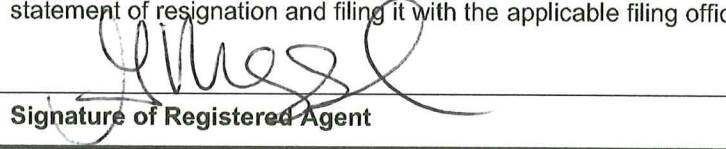
Street Address  
6619 S. Dixie Hwy No. 148

City State Zip Code  
Miami FL 33143

Mailing Address  
6619 S. Dixie Hwy No. 148

City State Zip Code  
Miami FL 33143

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.

 \_\_\_\_\_ Date 2/3/2021

**Former Registered Agent and Office Information (for changes only)**

Name Telephone  
**Joaquin Urquiola** 305-442-2200

Street Address  
2121 Ponce de Leon Blvd, Suite 1100

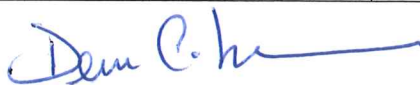
City State Zip Code  
Coral Gables FL 33143

**Committee or Organization Information**

Name of Committee or Organization  
**Miami Dade Citizens For Progress**

Street Address Telephone  
6619 S. Dixie Hwy No. 148 305-647-2666

City State Zip Code  
Miami FL 33143

 \_\_\_\_\_  
Signature of Chairperson

**Dennis C. Moss** \_\_\_\_\_ Date 2/9/21  
Printed Name of Chairperson