

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

1. Full Name of Committee

Providing Effective Government for All Residents

Telephone

305-531-2424

Mailing Address (include city, state and zip code)

600 Brickell Avenue, Suite 1715, Miami Florida, 33131

Street Address (include city, state and zip code)

600 Brickell Avenue, Suite 1715, Miami Florida, 33131

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

Candidates and Issues in Miami-Dade County, the City of Sweetwater and surrounding municipalities.

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

Making Government More Effective

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

Ana R. Frometa

11387 SW 7th Street
Sweetwater, Florida 33174

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
Gonzalo C. Sanchez	10949 SW 3rd Street Sweetwater, Florida 33174	Chairman
Juan Marin	11387 SW 7th Street Sweetwater, Florida 33174	Secretary
Juan-Carlos Planas, Esq.	600 Brickell Avenue, Suite 1715 Miami Florida, 33131	Registered Agent

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	n/a	n/a	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?

Donation to 501(c)(3) charitable organization.

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

Name of Bank or Depository & Account Number	Mailing Address
City National Bank of Florida	25 West Flagler Street Miami, Florida 33130

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

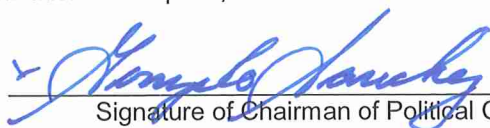
Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
SS4	Upon Formation	Internal Revenue Service	Ogden, UT 84201
Form 8871	Upon Formation	Internal Revenue Service	Ogden, UT 84201
Form 1120 POL	March 15, Annually	Internal Revenue Service	Ogden, UT 84201
Form 990	May 15, Annually	Internal Revenue Service	Ogden, UT 84201

STATE OF Florida Miami-Dade COUNTY

I, Gonzalo C. Sanchez, certify that the information in this Statement of

Organization is complete, true and correct.

X



Signature of Chairman of Political Committee

12-16-16

Date

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

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ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

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☒ Original Appointment of Treasurer ☐ Reappointment of Treasurer ☐ Deputy Treasurer

1. Committee or Organization

Providing Effective Government for All Residents

2. Telephone

(305) 531-2424

3. Name of Treasurer or Deputy Treasurer

Ana R. Frometa

4. Email (optional)

5. Telephone (optional)

()

6. Mailing Address

2600 South Douglas Road, Suite 900, Coral Gables, FL 33134

7. Street Address

11387 SW 7th Street Sweetwater, Florida 33174

8. The following bank has been designated as the

☒ Primary Depository ☐ Secondary Depository

9. Name of Bank

City National Bank of Florida

10. Street Address

25 West Flagler Street Miami

11. City

Miami

12. State

Florida

13. Zip Code

33130

14. Signature of Chairman

X 

15. Name of Chairman (Print or Type)

Gonzalo C. Sanchez

Campaign Treasurer's Acceptance of Appointment

I, Ana R. Frometa

(Please Print or Type)

, do hereby accept the appointment as

treasurer or deputy treasurer for

Providing Effective Government for All Residents

(Committee or Organization)

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.

X



Date

Signature of Campaign Treasurer or Deputy Treasurer

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

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CHECK APPROPRIATE BOX:

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☐ Original Appointment of Treasurer ☐ Reappointment of Treasurer ☒ Deputy Treasurer

1. Committee or Organization

Providing Effective Government for All Residents

2. Telephone

(305) 531-2424

3. Name of Treasurer or Deputy Treasurer

4. Email (optional)

Juan-Carlos Planas, Esq.

jcplanas@kymplaw.com

5. Telephone (optional)

(305) 531-2424

6. Mailing Address

2600 South Douglas Road, Suite 900, Coral Gables, FL 33134

7. Street Address

11387 SW 7th Street Sweetwater, Florida 33174

8. The following bank has been designated as the

☒ Primary Depository

☐ Secondary Depository

9. Name of Bank

City National Bank of Florida

10. Street Address

25 West Flagler Street Miami

11. City

Miami

12. State

Florida

13. Zip Code

33130

14. Signature of Chairman

X 

15. Name of Chairman (Print or Type)

Gonzalo C. Sanchez

Campaign Treasurer's Acceptance of Appointment

I, Juan-Carlos Planas, do hereby accept the appointment as
(Please Print or Type)

treasurer or deputy treasurer for

Providing Effective Government for All Residents

(Committee or Organization)

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.

X

Date


Signature of Campaign Treasurer or Deputy Treasurer

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**

(Section 106.022, F.S.)

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

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

Registered Agent and Office Information

Name
Juan-Carlos Planas, Esq. Telephone
305-929-8500

Street Address
600 Brickell Avenue, Suite 1715

City State Zip Code
Miami Florida 33131

Mailing Address
600 Brickell Avenue, Suite 1715

City State Zip Code
Miami Florida 33131

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.



Signature of Registered Agent

12/16/16
Date

Former Registered Agent and Office Information (for changes only)

Name Telephone

Street Address

City State Zip Code

Committee or Organization Information

Name of Committee or Organization
Providing Effective Government for All Residents

Street Address Telephone
600 Brickell Avenue, Suite 1715 305-531-2424

City State Zip Code
Miami Florida 33131



Signature of Chairperson

Gonzalo C. Sanchez

Printed Name of Chairperson

12-16-16
Date

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



☐ Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

☒ Political Committee: Providing Effective Government for All Residents

☐ Party Executive Committee: _____

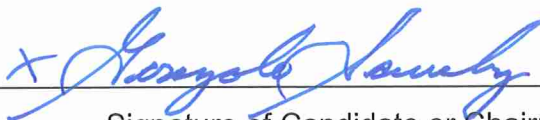
☐ Other: _____

I, _____
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically via the Supervisor of Elections website by midnight of the day designated in order to comply with Miami-Dade County requirements. I also acknowledge that Sections 12-17 and 12-21 of the Code of Miami-Dade County regarding the filing of the campaign finance reports with the Supervisor of Elections were recently amended in that original signed hardcopies 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 Miami-Dade County Mayor, Commissioner, Property Appraiser, Clerk of the Circuit Courts, and Community Council must now file the Absentee Ballot Campaign Report ([MD-ED 26](#)) to disclose the names of paid campaign workers engaged in absentee ballot activities.

Lastly, I understand that Section 2.69(e) of the Code of Miami-Dade County requires that candidates for Property Appraiser also fill out the Miami-Dade county Contributing Entity ([MD-ED 19](#)) form for every reporting period if contributions are received from a corporation incorporated under the laws of the State of Florida or any other state or any foreign country of any partnership or any other legal entity other than a natural person.



Signature of Candidate or Chairperson

12-16-16

Date

Day Time Telephone Number: 305-531-2424

Alternate Contact Number: 850-980-6542

Email Address: gonzalosanchez25@yahoo.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.

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**Access to Handbook and the
Election Laws of the State of Florida**

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ELECTIONS DEPARTMENT

Candidate/Chairperson:

Gonzalo

Sanchez

First Name

Middle Name

Last Name

Providing Effective Government for All Residents

Office Sought / Organization

I acknowledge that it is my responsibility to read, understand and follow the requirements described in the following resources available on the Miami-Dade County Elections Department Website:

- ☐ Candidate Qualifying Handbook (<http://www.miamidade.gov/elections/candidate.asp>)
Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes.
- ☒ Political Committee Handbook (<http://www.miamidade.gov/elections/pacs.asp>)
Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes.

Acknowledged by:



Candidate / Chairperson Signature

Date:

Primary Telephone Number:

305-531-2424

Alternate Telephone Number:

850-980-6542

E-mail address:

gonzalosanchez25@yahoo.com