STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

RECEIVED

2017 APR 27 PM 3: 12

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

		has been been by I I was a	4731 × 6		
1. Full Name of Committee Alliance For A Better Community PC			Telephone 305-442-2200		
Mailing Address (include city, state and zip code) 2121 Ponce de Leon Blvd, Ste 1100, Coral Gables, FL 33134					
Street Address (include city, s 2121 Ponce de Leon Blvd	state and zip code) , Ste 1100, Coral Gables, FL 33134				
Affiliated or Connected Org committees)	ganizations (includes other committees o	f continuous ex	istence and political		
Name of Affiliated or Connected Organization	Mailing Address	Mailing Address			
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 not prohibited by chapter 106, F.S.					
4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)					
5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)					
Full Name	Mailing Address	Com	Committee Title or Position		
Gloria Maggiolo	2121 Ponce de Leon Blvd Suite 1100 Coral Gables, FL 33134	Treasure	er		

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				
Fritz Nicolas	10582 SW 14th Street Pembroke Pines, FL 33025		Chairperson				
Gloria Maggiolo	2121 Ponce de Leon Blvd, Suite 1100, Coral Gables, FL 33134		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	Mailing Address Office		Sought		Party	
To be determined					ELECTIC MIAMI	2017 APR	
8. List Any Issues this Com	mittee is Supporting: _{n/a}	·			NSI	N	O
List Any Issues this Committee is Opposing:							
9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party Non-partisan						Page 1	
10. In the Event of Dissolution, What Disposition will be Made of Residual Funds? Return to contributors or donate to 501(c) or 527 organization.							
11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds							
Name of Bank or Depository & Account Number Mailing Address							
		2000 Ponce de Leon Blvd Coral Gables, FL 33134					
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	Mailing Address			
Form SS-4 Form 8871	upon formation upon formation & at closing	Internal Revenue Internal Revenue		Odgen Odgen			
STATE OF FLORIDA		MIAMI-DADE COUNTY					
Fritz Nicolas , certify that the information in this Statement of							
Organization is complete, true and correct. X Signature of Chairman of Political Committee A/26/2017 Date							

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR**

POLITICAL COMMITTEES

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

RECEIVED

2017 APR 27 PM 3: 12

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

OFFICE USE ONLY CHECK APPROPRIATE BOX: **Deputy Treasurer** Original Appointment of Treasurer Reappointment of Treasurer 2. Telephone 1. Committee or Organization Alliance For A Better Community PC (305) 442-2200 5. Telephone (optional) 3. Name of Treasurer or Deputy Treasurer 4. Email (optional) (305)442-2200Gloria Maggiolo 6. Mailing Address 2121 Ponce de Leon Blvd, Ste 1100, Coral Gables, FL 33134 7. Street Address 2121 Ponce de Leon Blvd, Ste 1100, Coral Gables, FL 33134 **Secondary Depository** 8. The following bank has been designated as the 9. Name of Bank 10. Street Address 2000 Ponce de Leon Blvd, Ste 101 BB&T 12. State 13. Zip Code 11. City 33134 FL **Coral Gables** 15. Name of Chairman (Print or Type) Fritz Nicolas Campaign Treasurer's Acceptance of Appointment Gloria Maggiolo , do hereby accept the appointment as (Please Print or Type) Alliance For A Better Community PC treasurer or deputy treasurer for (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 04/26/17 X Signature of Campaign Treasurer or Deputy Treasurer

Date

REGISTERED AGENT STATEMENT OF APPOINTMENT

(Section 106.022, F.S.)

R EOFFICE USE ONLY

2017 APR 27 PM 3: 12

(0601011 100.022, 1.0.)		2011			
		MIAMI	-DADE COUNTY ONS DEPARTMENT		
Original Appointment Change of Appointment		ELEVIN	5,10		
Change of Mailing Address Change of Physical Address			·		
Registered Agent and Office Information					
Name Gloria Maggiolo			Telephone 305-442-2200		
Street Address 2121 Ponce de Leon Blvd, Ste 1100					
City Coral Gables	ity State		Zip Code 33134		
Mailing Address 2121 Ponce de Leon Blvd, Ste 1100					
City Coral Gables	ty		Zip Code 33134		
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 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					
Alliance For A Better Community Postreet Address 2121 Ponce de Leon Blvd, Ste 1100	<i></i>		Telephone 305-442-2200		
City Coral Gables	State FL		Zip Code 33134		
Signature of Chairperson					
Fritz Nicolas	04/26/2017				
Printed Name of Chairperson		Date			

RECEIVED



Access to Handbook and the Election Laws of the State of Florida APR 27 PM 3: 12

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

Candidate/Chairperson:				
Fritz		Nicolas		
First Name	Middle Name	Last Name		
Alliance For A Better	Community PC			
	Office Sought / Organization			
I acknowledge that it is my requirements described in th County Elections Department V	ne following resources			
Contains information on Sta Florida, County Laws and H	ite Laws and Handbooks, the landbooks, Qualifying Inform	e.gov/elections/candidate.asp) e Election Laws of the State of nation, Electronic Reporting Dates Recent Legislative Changes.		
Florida, County Laws and H	ite Laws and Handbooks, the	e Election Laws of the State of ting Dates and Procedures,		
Acknowledged by:	Sut Urelan Candidate / Chairperson	Signature		
Primary Telephone Number:	305-300-7811			
Alternate Telephone Number	305-442-2200			
E-mail address: fanic63	@yahoo.com			

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



	Candidate (office sought):	
	Candidate's Florida Voter Registration Number:	
√	Political Committee: Alliance For A Better Comm	nunity PC
_	Party Executive Committee:	E ZO A
	Other:	770 PR 2
l,	Fritz Nicolas (Please print name of Candidate or Chairperson)	S D D P P P P P P P P P P P P P P P P P
S w 12 re	nderstand that Campaign Treasurer's Reports <u>must</u> be file upervisor of Elections website by midnight of the day design ith Miami-Dade County requirements. I also acknowledge to 2-21 of the Code of Miami-Dade County regarding the filing eports with the Supervisor of Elections were recently amended ardcopies are no longer required.	nated in order to comply hat Sections 12-17 and of the campaign finance
C C m	also understand that, in accordance with Section 12-14.1 of toolnty, Florida, candidates running for the Offices of Miarommissioner, Property Appraiser, Clerk of the Circuit Courts, bust now file the Absentee Ballot Campaign Report (MD-ED 2) paid campaign workers engaged in absentee ballot activities.	mi-Dade County Mayor, and Community Council <u>6</u>) to disclose the names
th E	astly, I understand that Section 2.69(e) of the Code of Mian lat candidates for Property Appraiser also fill out the Miami-D ntity (MD-ED 19) form for every reporting period if contributi proporation incorporated under the laws of the State of Florida preign country of any partnership or any other legal entity other	Pade county Contributing ons are received from a or any other state or any
	Just Shulas	04/26/2017
	Signature of Candidate or Chairperson	Date
D	ay Time Telephone Number: 305-300-7811	
А	Iternate Contact Number: 305-442-2200	
	mail Address: fanic63@yahoo.com	