

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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MIAMI-DADE
ELECTIONS

1. Full Name of Committee

Biscayne Gardens Brighter Future PAC

Telephone

786-584-2810

Mailing Address (include city, state and zip code)

520 NW 165th Street
Miami, FL 33169

Street Address (include city, state and zip code)

Same As

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
Biscayne Gardens Brighter Future PAC LLC	520 NW 165th Street Road Miami FL 33169	tax id purposes

3. Area, Scope and Jurisdiction of the Committee

Miami-Dade County Florida

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

Political Issues & State and Local Candidates

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
Lawrence Jessup	520 NW 165th Street Road Miami FL 33169	Treasurer/Vice Chairman

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
Bernard Wh Jennings	520 NW 165th Street Road Miami Fl 33169	Chairman
Lawrence Jessup	520 NW 165th Street Road Miami Fl 33169	Treasurer, Vice Chairman

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MIAMI-DADE ELECTIONS

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
none			

8. List Any Issues this Committee is Supporting: The Incorporation of Biscayne Gardens

List Any Issues this Committee is Opposing:

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?

Repayment of loans, donate to charity and/or refund donors

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

Name of Bank or Depository & Account Number	Mailing Address
TD Bank	1190 NE 163rd Street Miami, Fl 33162

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

STATE OF Florida Miami-Dade COUNTY

I, Bernard Wh Jennings, certify that the information in this Statement of

Organization is complete, true and correct.

X 
Signature of Chairman of Political Committee

11/18/18
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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MIAMI-DADE
ELECTIONS

CHECK APPROPRIATE BOX:

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Initial Filing of Form Re-filing to Change: Primary Treasurer Deputy Treasurer Primary/Secondary Depository

1. Committee or Organization Biscayne Gardens Brighter Future PAC	2. Telephone (786) 584-2810
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3. Name of Treasurer or Deputy Treasurer Lawrence Jessup	4. Email (optional)
5. Telephone (optional) ()	

6. Mailing Address
520 NW 165th Street Road Miami Fl 33169

7. Street Address
SAME AS

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

9. Name of Bank TD BANK	10. Street Address 1190 NE 163rd Street
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11. City North Miami Beach	12. State FL	13. Zip Code 33162
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14. Signature of Chairman X 	15. Name of Chairman (Print or Type) Bernard Wh Jennings
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Campaign Treasurer's Acceptance of Appointment

I, **Lawrence Jessup**, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for **Biscayne Gardens Brighter Future PAC**
(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.**

11/18/2018
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer

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

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

Registered Agent and Office Information

Name: **Monique Morgan** Telephone: _____

Street Address: **520 NW 165th Street Road Suite 112**

City: **Miami** State: **Florida** Zip Code: **33169**

Mailing Address: **SAME AS**

City: _____ 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.

Monique H. Morgan 11/18/18
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: **Biscayne Gardens Brighter Future PAC**

Street Address: **520 NW 165th Street Road Suite 112** Telephone: **786-285-8872**

City: **Miami** State: **Florida** Zip Code: **33169**

[Signature]
Signature of Chairperson

Bernard Wh Jennings 11/18/18
Printed Name of Chairperson Date



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

Candidate/Chairperson:

Bernard

WH

Jennings

First Name

Middle Name

Last Name

Biscayne Gardens Brighter Future PAC

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)
Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp)

Acknowledged by:

[Handwritten Signature]

Candidate / Chairperson Signature

Date:

11/30/18

Primary Telephone Number: 786-486-7217

Alternate Telephone Number:

E-mail address: BGBFPAC@gmail.com

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



- Candidate (office sought): _____
Candidate's Florida Voter Registration Number: _____
- Political Committee: Biscayne Gardens Brighter Future PAC
- Party Executive Committee: _____
- Other: _____

I, Bernard WH Jennings

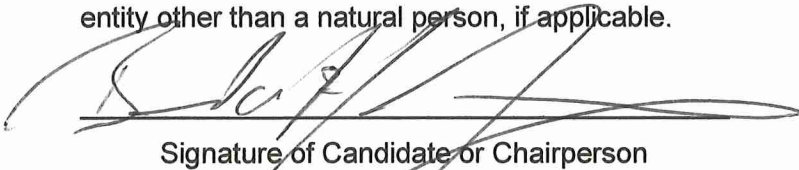
(Please print name of Candidate or Chairperson)

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 Vote by Mail Campaign Report ([MD-ED 26](#)) to disclose the names of paid campaign workers engaged in vote by mail ballot activities, if applicable.

Additionally, I understand that, in accordance with Sections 12-14.2 and 12-14.2.1 of the Code of Miami-Dade County, Florida, Miami-Dade County Elected Officers and 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 Reporting of Solicitation of Contributions for Political Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Political Parties ([MD-ED 28](#)) to publicly disclose when they commence solicitation activities for Political Committees, Electioneering Communications Organizations, Political Parties, and/or 501(c)4 organizations, if applicable.

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, if applicable.



Signature of Candidate or Chairperson

11/30/18
Date

Day Time Telephone Number: 786-486-7217

Alternate Contact Number: _____

Email Address: bgbfpac@gmail.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.