

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

2011-03-29 11:45

<b>1. Full Name of Committee</b> Friends of the Gables	Telephone 305-445-0777
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Mailing Address (include city, state and zip code)

2600 S. Douglas Road, Suite 900, Coral Gables, Florida 33134

Street Address (include city, state and zip code)

2600 S. Douglas Road, Suite 900, Coral Gables, Florida 33134

**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		

**3. Area, Scope and Jurisdiction of the Committee**

Miami-Dade County---candidate and ballot issues for county-wide and municipal elections

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

Good government

**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
Jose A. Riesco, CPA	2600 S. Douglas Road, Suite 900 Coral Gables, Florida 33134	Treasurer
Jeannine R. Miranda	2600 S. Douglas Road, Suite 900 Coral Gables, Florida 33134	Deputy 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
Manny Miguelez	2600 S. Douglas Road, Suite 900 Coral Gables, Florida 33134	Chairperson

**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
To be determined			

**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?**  
 Any disposition allowed under Florida law for 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
Regions Bank	3516 Main Highway Miami, Florida 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 Official	Mailing Address
Form 8871 Form 1120 POL Form 990	Upon formation Annually Annually	Internal Revenue Service	Ogden, UT 84201

STATE OF Florida Miami-Dade COUNTY

I, Manny Miguelez, certify that the information in this Statement of

Organization is complete, true and correct.

**X**   
 Signature of Chairman of Political Committee

02/27/2020  
 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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2020 APR -2 PM 2:01  
HARRIS COUNTY  
ELECTIONS

**CHECK APPROPRIATE BOX:**

Initial Filing for:  Primary Treasurer  Deputy Treasurer

OFFICE USE ONLY

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

1. Committee  
Friends of the Gables

2. Telephone  
(305 ) 445-0777

3. Name of Treasurer or Deputy Treasurer  
Jose A. Riesco, CPA

4. Email (optional)  
jose@riescoandcompany.com

5. Telephone (optional)  
(305 ) 445-0777

6. Mailing Address  
2600 S. Douglas Road, Suite 900, Coral Gables, Florida 33134

7. Street Address  
2600 S. Douglas Road, Suite 900, Coral Gables, Florida 33134

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

9. Name of Bank  
Regions Bank

10. Street Address  
3516 Main Highway

11. City  
Miami

12. State  
Florida

13. Zip Code  
33134

14. Signature of Chairman

X

15. Name of Chairman (Print or Type)  
Manny Miguez

**Campaign Treasurer's Acceptance of Appointment**

I, Jose A. Riesco, CPA, do hereby accept the appointment as  
(Please Print or Type)

treasurer or deputy treasurer for Friends of the Gables  
(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.

4/28/2020  
Date

X   
Signature of Campaign Treasurer or Deputy Treasurer

**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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TREASURER  
ELECTORALS

**CHECK APPROPRIATE BOX:**

Initial Filing for:  Primary Treasurer  Deputy Treasurer

OFFICE USE ONLY

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

1. Committee  
Friends of the Gables

2. Telephone  
(305 ) 445-0777

3. Name of Treasurer or Deputy Treasurer  
**Jeannine R. Miranda**

4. Email (optional)  
jen@riescoandcompany.com

5. Telephone (optional)  
(305 ) 445-0777

6. Mailing Address  
2600 S. Douglas Road, Suite 900, Coral Gables, Florida 33134

7. Street Address  
2600 S. Douglas Road, Suite 900, Coral Gables, Florida 33134

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

9. Name of Bank  
Regions Bank

10. Street Address  
3516 Main Highway

11. City  
Miami

12. State  
Florida

13. Zip Code  
33134

14. Signature of Chairman

**X**

15. Name of Chairman (Print or Type)  
Manny Miguez

**Campaign Treasurer's Acceptance of Appointment**

I, Jeannine R. Miranda, do hereby accept the appointment as  
(Please Print or Type)

treasurer or deputy treasurer for Friends of the Gables  
(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.

2/26/2020  
Date

**X**   
Signature of Campaign Treasurer or Deputy Treasurer



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

OFFICE USE ONLY

2020 FEB -2 PM 2:01


MAILING FREE  
ELECTIONS

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

**Registered Agent and Office Information**

Name Jose A. Riesco, CPA		Telephone 305-445-0777
Street Address 2600 S. Douglas Road, Suite 900		
City Coral Gables	State Florida	Zip Code 33134
Mailing Address 2600 S. Douglas Road, Suite 900		
City Coral Gables	State Florida	Zip Code 33134

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


2/20/2020  
\_\_\_\_\_  
Date

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

Name N/A		Telephone
Street Address		
City	State	Zip Code

**Committee or Organization Information**

Name of Committee or Organization Friends of the Gables		
Street Address 2600 S. Douglas Road, Suite 900		Telephone 305-445-0777
City Coral Gables	State Florida	Zip Code 33134

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

Manny Miguez  
\_\_\_\_\_  
Printed Name of Chairperson

02/27/2020  
\_\_\_\_\_  
Date



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

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MIAMI-DADE  
ELECTIONS

Candidate/Chairperson:

Manny

Miguel

First Name

Middle Name

Last Name

Friends of the Gables

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

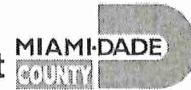
Date: 02/27/2020

Primary Telephone Number: 305-445-0777

Alternate Telephone Number: 786-401-2163

E-mail address: em@miguelezlaw.com

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



Candidate (office sought): \_\_\_\_\_  
Candidate's Florida Voter Registration Number: \_\_\_\_\_

Political Committee: Friends of the Gables

Party Executive Committee: \_\_\_\_\_

Other: \_\_\_\_\_

I, Manny Miguelez

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MIAMI-DADE  
COUNTY  
ELECT


*(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

02/27/2020  
Date

Day Time Telephone Number: 305-445-0777

Alternate Contact Number: 786-401-2163

Email Address: em@miguelezlaw.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.*