

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

1. Full Name of Committee

Housing for the Homeless in South Florida, PC

Telephone

850-980-6542

Mailing Address (include city, state and zip code)

18851 NE 29 Avenue
Suite 1010
Aventura, Florida 33180

Street Address (include city, state and zip code)

18851 NE 29 Avenue
Suite 1010
Aventura, Florida 33180

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

County-wide organization: Political committees supporting or opposing candidates and/or issues in Miami-Dade County and its municipalities.

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

Voter education on homeless issues in Miami-Dade County and its municipalities.

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
Ronald L. Book	18851 NE 29 Avenue, Suite 1010 Aventura, Florida 33180	Chairman
Juan-Carlos Planas, Esq.	2332 Galiano Street, 2nd Floor Coral Gables, FL 33134	Registered Agent
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
N/A	N/A	N/A	N/A

8. List Any Issues this Committee is Supporting: 2021 Miami Beach Straw Ballot Question 2, Vote Yes, #286,

List Any Issues this Committee is Opposing: N/A

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?

Return to contributors or donate to 501(c) organization.

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 Acct# TBD	6202 S. Dixie Hwy Miami, FL 33143

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 & at closing	Internal Revenue Service	Ogden, UT 84201

STATE OF FLORIDA Miami-Dade COUNTY

I, Ronald L. Book, certify that the information in this Statement of

Organization is complete, true and correct.

X

Signature of Chairman of Political Committee

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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ELECTIONS DEPARTMENT

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 Housing for the Homeless in South Florida, PC	2. Telephone (850) 980-6542
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3. Name of Treasurer or Deputy Treasurer Gloria Maggiolo	4. Email (optional) gloria@bffcompliance.com	5. Telephone (optional) (305) 647-2666
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6. Mailing Address
c/o Gloria Maggiolo, 6619 S. Dixie Hwy, Num 148, Miami, FL 33143

7. Street Address
6619 S. Dixie Hwy Num 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
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11. City Miami	12. State FL	13. Zip Code 33143
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14. Signature of Chairman X 	15. Name of Chairman (Print or Type) Ronald L. Book
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Campaign Treasurer's Acceptance of Appointment

Gloria Maggiolo

I, _____, do hereby accept the appointment as
(Please Print or Type)

treasurer or deputy treasurer for Housing for the Homeless in South Florida, PC
(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.**

10/1/2021
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer

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

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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: 850-980-6542

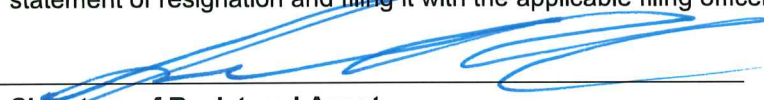
Street Address: 2332 Galiano Street, 2nd Floor

City: Coral Gables State: Florida Zip Code: 33134

Mailing Address: 2332 Galiano Street, 2nd Floor

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.

 _____ Date: 9/20/21

Signature of Registered Agent

Date

Former Registered Agent and Office Information (for changes only)

Name: N/A Telephone:

Street Address:

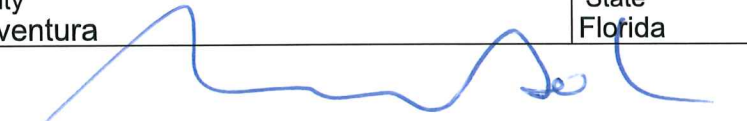
City: State: Zip Code:

Committee or Organization Information

Name of Committee or Organization: Housing for the Homeless in South Florida, PC

Street Address: 18851 NE 29 Avenue, Suite 1010 Telephone: 850-980-6542

City: Aventura State: Florida Zip Code: 33180



Signature of Chairperson

Ronald L. Book

Printed Name of Chairperson

_____ Date: 9/28/21

Date



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

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

Candidate/Chairperson:

Ronald

L.

Book

First Name

Middle Name

Last Name

Housing for the Homeless in South Florida, PC

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
(<https://www.miamidade.gov/global/elections/candidate-qualifying-handbook.page>)
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
(<https://www.miamidade.gov/global/elections/political-committee-resources.page>)
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: [Signature]
Candidate / Chairperson Signature

Date: 9/28/21

Primary Telephone Number: 305-935-1866

Alternate Telephone Number: 850-980-6542

E-mail address: ron@rlbookpa.com

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



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ELECTIONS DEPARTMENT

- Candidate (office sought): _____
- Candidate's Florida Voter Registration Number: _____
- Political Committee: Housing for the Homeless in South Florida, PC
- 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 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

9/28/21

Date

Day Time Telephone Number: 305-935-1866

Alternate Contact Number: 850-980-6542

Email Address: gloria@bffcompliance.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.