STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

OFFICE USE ONLY

Telephone?

305-649-3

(PLEASE TYPE)

1. Full Name of Committee

YES For A Greater Miami-Dade!

Mailing Address (include city, state and zip code)

P.O. Box 350940 Miami, FL 33135

Street Address (include city, state and zip code)

401 NW 38th Ct.

Miami, FL 33126

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
Calder Race Course, Inc. West Flagler Assocs., Ltd.	P.O. Box 1808, Opa Locka, FL 33055 P.O. Box 350940, Miami, FL 33135	Miami-Dade Pari-Mutuel Miami-Dade Pari-Mutuel

3. Area, Scope and Jurisdiction of the Committee

Sponsor of Miami-Dade County Referendum for Approval of Slot Machines in Existing Miami-Dade Pari-Mutuel Facilities

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

5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)

Mailing Address	Committee Title or Position		
P.O. Box 350940, Miami, FL 33135	Treasurer		
P.O. Box 350940, Miami, FL 33135 P.O. Box 350940, Miami, FL 33135	Deputy Treasurer Deputy Treasurer		
P.O. Box 10369, Tallahassee, FL 32302	Registered Agent		
	P.O. Box 350940, Miami, FL 33135 P.O. Box 350940, Miami, FL 33135 P.O. Box 350940, Miami, FL 33135		

(continued on reverse side)

DS-DE 5 (Rev. 05/06)

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 Addr	Mailing Address		Committee Title or Position			
Barbara Havenick Isadore Havenick Ken Dunn Mike Abes	P.O. Box 350940, Miami, FL 33135 P.O. Box 350940, Miami, FL 33135 P.O. Box 1808, Opa Locka, FL 33055 P.O. Box 1808, Opa Locka, FL 33055		Chair Director Vice-Chair Director				
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		Party			
None.		·		H 2: 52			
8. List Any Issues this Committee is Supporting: Miami-Dade Co. Slot Machines							
List Any Issues this Committee is Opposing:							
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? Will be returned to contributors.							
11. List all Banks, Safety I	Deposit Boxes, or Other Depos	sitories Used for Co	mmittee Funds				
Name of Bank or Depository & Account Number			Mailing Address				
MetroBank	9350 South Di		ie Highway				
	_	Miami, FL 33156					
Account No.							
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 o	f Official	Mailing Address			
None.							
STATE OF FLORIDA		MIAMI-D	ADE COUNTY				
I, BARBARA HECHT HAVENICK , certify that the information in this Statement of							
Organization is complete, tre X Signature of C	ue and correct. Line and correct. Chairman of Political Committee	reject	4/03	3/07			

OFFICE USE ONLY STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR POLITICAL COMMITTEES** AND ELECTIONEERING COMMUNICATION **ORGANIZATIONS** (Sections 106.011(1) & 106.021(1), F.S.) (PLEASE TYPE) **CHECK APPROPRIATE BOX:** ✓ Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository 1. Committee or Electioneering Communication Organization Name 2. Mailing Address P.O. Box 350940 YES For A Greater Miami-Dade! Telephone (optional) 3. City 4. County 5. State 6. Zip Code Miami Miami-Dade FL 33135 The following person has been appointed to serve as ✓ Campaign Treasurer Deputy Treasurer for the above named committee. 7. Name of Treasurer or Deputy Treasurer 8. Street Address Leon Reitnauer 401 NW 38th Ct. 9. City 10. County 11. State 12. Zip Code Miami Miami-Dade FL 33126 I have designated the following named bank as my **Primary Depository** Secondary Depository 13. Bank Name (include account number) 14. Street Address 9350 South Dixie Highway Metro-Bank Account 15. City 16. County 17. State 18. Zip Code Miami Miami-Dade FL 33156 19. Name of Chairman 20. Signature of Chairman Barbara H. Havenick Campaign Treasurer's Acceptance of Appointment Leon Reitnauer , do hereby accept the appointment as (Please Print or Type) Campaign Treasurer Deputy Treasurer for the YES For A Greater Miami-Dade! Committee or Organization. As a duly registered voter in County, Florida, I am Miami-Dade qualified to accept this appointment. 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. Signature of Campaign Treasurer or Deputy Treasurer

OFFICE USE ONLY STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR POLITICAL COMMITTEES** AND ELECTIONEERING COMMUNICATION **ORGANIZATIONS** (Sections 106.011(1) & 106.021(1), F.S.) (PLEASE TYPE) **CHECK APPROPRIATE BOX:** ✓ Deputy Treasurer Original Appointment Reappointment of Treasurer Secondary Depository 1. Committee or Electioneering Communication Organization Name 2. Mailing Address P.O. Box 350940 YES For A Greater Miami-Dade! Telephone (optional) 3. City 4. County 5. State 6. Zip Code Miami. Miami-Dade Co. FL 33135 The following person has been appointed to serve as Deputy Treasurer for the above named committee. Campaign Treasurer 7. Name of Treasurer or Deputy Treasurer 8. Street Address Peggy Allen 401 NW 38th Ct. 9. City 10. County 11. State 12. Zip Code Miami Miami-Dade FL 33126 I have designated the following named bank as my **Primary Depository** Secondary Depository 13. Bank Name (include account number) 14. Street Address 9350 South Dixie Highway MetroBank Account 15. City 16. County 17. State 18. Zip Code Miami Miami-Dade FL 33156 19. Name of Chairman 20. Signature of Chairman Barbara H. Havenick EULLI/K Campaign Treasurer's Acceptance of Appointment Peggy Allen , do hereby accept the appointment as (Please Print or Type) Campaign Treasurer □ Deputy Treasurer for the YES For A Greater Miami-Dade! Committee or Organization. As a duly registered voter in County, Florida, I am Miami-Dade qualified to accept this appointment. 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. April /// , 2007 Signature of Campaign Treasurer or Deputy Treasurer

OFFICE USE ONLY STATE OF FLORIDA APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR POLITICAL COMMITTEES** AND ELECTIONEERING COMMUNICATION **ORGANIZATIONS** (Sections 106.011(1) & 106.021(1), F.S.) (PLEASE TYPE) **CHECK APPROPRIATE BOX:** ✓ Deputy Treasurer Original Appointment Reappointment of Treasurer Secondary Depository 1. Committee or Electioneering Communication Organization Name 2. Mailing Address P.O. Box 350940 YES For A Greater Miami-Dade! Telephone (optional) 3. City 4. County 5. State 6. Zip Code Miami Miami-Dade Co. FL 33135 The following person has been appointed to serve as Campaign Treasurer ✓ Deputy Treasurer for the above named committee. 7. Name of Treasurer or Deputy Treasurer 8. Street Address Martha Wright 401 NW 38th Ct. 9. City 10. County 11. State 12. Zip Code Miami Miami-Dade FL 33126 I have designated the following named bank as my ✓ Primary Depository Secondary Depository 13. Bank Name (include account number) 14. Street Address MetroBank Account 9350 South Dixie Highway 15. City 16. County 17. State 18. Zip Code Miami Miami-Dade FL 33156 19. Name of Chairman 20. Signature of Chairman Barbara H. Havenick Campaign Treasurer's Acceptance of Appointment Martha Wright , do hereby accept the appointment as (Please Print or Type) Deputy Treasurer for the YES For A Greater Miami-Dade! Campaign Treasurer Committee or Organization. As a duly registered voter in County, Florida, I am Miami-Dade qualified to accept this appointment. 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. April [] . 2007

OFFICE USE ONLY REGISTERED AGENT STATEMENT OF APPOINTMENT (Section 106.022, F.S.) (Please Type) Original Appointment Change of Appointment **Registered Agent and Office Information** Telephone 850-222-7718 Name Wilbur E. Brewton Street Address 225 S. Adams St., Ste. 250 Zip Code 32301 State FL City Tallahassee Mailing Address 225 S. Adams St., Ste. 250 State FL Zip Code 32301 City Tallahassee I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in 32ction 104.032, F.S. I also understand that I may resign this appointment by executing a written on and filing it with the Division of Elections. Signature of Registered Agent 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 YES For A Greater Miami-Dade! Street Address 401 NW 38th Ct. Telephone 305-649-3000 Zip Code 33126 State FL ^{City} Miami Committee or organization is registered with: County Miami-Dade City _ Division of Elections Signature of Chairperson April 3, 2007 Barbara H. Havenick **Print Name of Chairperson** Date