

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

<b>1. Full Name of Committee</b>  Friends of Miami-Dade College	<b>Telephone</b>  305-373-5500
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Mailing Address (include city, state and zip code)  
  
1001 Brickell Bay Drive, 9th Floor  
Miami, FL 33131

Street Address (include city, state and zip code)  
Same As Above

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

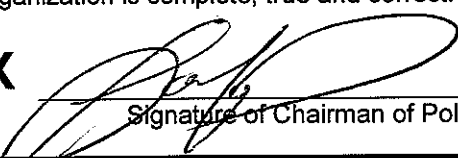
Name of Affiliated or Connected Organization	Mailing Address	Relationship
Friends of Your Community College	1001 Brickell Bay Drive, 9th Floor Miami, FL 33131	Same Entity, We have Changed the name to Friends of Miami-Dade College

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

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

**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
Antonio L. Argiz	1001 Brickell Bay Drive, 9th Floor Miami, FL 33131	Treasurer
Ed S. Torgas	1001 Brickell Bay Drive, 9th Floor Miami, FL 33131	Deputy Treasurer

<b>6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)</b>			
Full Name	Mailing Address	Committee Title or Position	
Louis Wolfson	9400 S. Dadeland Blvd., Suite 100 Miami, FL 33156	Chairman & President	
<b>7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate)</b>			
Full Name	Mailing Address	Office Sought	Party
NA			
<b>8. List Any Issues this Committee is Supporting: Education Funding</b>			
List Any Issues this Committee is Opposing: None			
<b>9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party</b>			
NA			
<b>10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?</b>			
Upon dissolution, any residual funds will be contributed to a political committee with similar purpose or to a 501 (c)3 organization with an education related purpose.			
<b>11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds</b>			
Name of Bank or Depository & Account Number		Mailing Address	
Regions Bank - Acc#0098479679 Acc#8310384352 Acc#0077605969		2800 Ponce De Leon Blvd., 9th Floor Coral Gables, FL 33134	
<b>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</b>			
Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
STATE OF <u>Florida</u>		<u>Miami-Dade</u> COUNTY	
I, <u>Louis Wolfson III</u> , certify that the information in this Statement of Organization is complete, true and correct.			
<b>X</b> 		<u>7/1/09</u>	
Signature of Chairman of Political Committee		Date	

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 ELECTIONS DEPARTMENT

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR POLITICAL  
COMMITTEES AND ELECTIONEERING  
COMMUNICATION ORGANIZATIONS**  
(Sections 106.011(1) and 106.021(1), F.S.)

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ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

- Original Appointment of Treasurer       Reappointment of Treasurer       Deputy Treasurer

1. Committee or Organization: Friends of Miami-Dade College  
2. Account Number: \_\_\_\_\_  
3. Telephone: (305 ) 373-5500

4. Name of Treasurer or Deputy Treasurer: Antonio L. Argiz  
5. Email (optional): \_\_\_\_\_  
6. Telephone (optional): (305 ) 373-5500

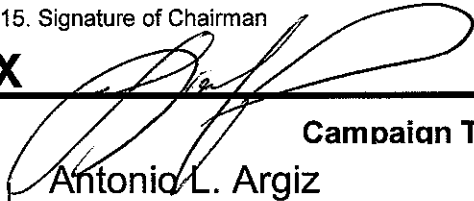
7. Mailing Address: 1001 Brickell Bay Dr., 9th Floor, Miami, FL 33131

8. Street Address: Same as above

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

10. Name of Bank: Regions Bank  
11. Street Address: 2800 Ponce De Leon Blvd., 9th Floor

12. City: Miami  
13. State: FL  
14. Zip Code: 33131

15. Signature of Chairman:   
16. Name of Chairman (Print or Type): Louis Wolfson III

**Campaign Treasurer's Acceptance of Appointment**

Antonio L. Argiz, do hereby accept the appointment as  
(Please Print or Type)  
treasurer or deputy treasurer for Friends of Miami-Dade College  
(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.

7/1/09 Date       Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR POLITICAL  
COMMITTEES AND ELECTIONEERING  
COMMUNICATION ORGANIZATIONS**  
(Sections 106.011(1) and 106.021(1), F.S.)

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ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment of Treasurer       Reappointment of Treasurer       Deputy Treasurer

1. Committee or Organization: Friends of Miami-Dade College  
2. Account Number: \_\_\_\_\_  
3. Telephone: (305 ) 373-5500

4. Name of Treasurer or Deputy Treasurer: Ed S. Torgas  
5. Email (optional): \_\_\_\_\_  
6. Telephone (optional): (305 ) 373-5500

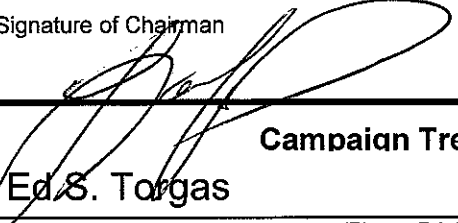
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10. Name of Bank: Regions Bank  
11. Street Address: 2800 Ponce De Leon Blvd., 9th Floor

12. City: Miami      13. State: FL      14. Zip Code: 33131

15. Signature of Chairman:       16. Name of Chairman (Print or Type): Louis Wolfson III

**Campaign Treasurer's Acceptance of Appointment**  
I, Ed S. Torgas, do hereby accept the appointment as  
(Please Print or Type)  
treasurer of deputy treasurer for Friends of Miami-Dade College  
(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.**

7/1/09        
Date      Signature of Campaign Treasurer or Deputy Treasurer

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

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

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

**Registered Agent and Office Information**

Name **Ed S. Torgas** Telephone **305-373-5500**

Street Address **1001 Brickell Bay Drive, 9th Floor**

City **Miami** State **FL** Zip Code **33131**

Mailing Address **Same as above**

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 Division of Elections.

\_\_\_\_\_  
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  
**Friends of Miami-Dade College**

Street Address **1001 Brickell Bay Drive, 9th Floor** Telephone **305-373-5500**

City **Miami** State **FL** Zip Code **33131**

Committee or organization is registered with:

- Division of Elections       County \_\_\_\_\_       City \_\_\_\_\_

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

**Louis Wolfson III**

\_\_\_\_\_  
Print Name of Chairperson

**7/1/09**  
Date

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



Candidate (office sought): \_\_\_\_\_

Political Committee: \_\_\_\_\_

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

Other: Friends of Miami Dade College  
chairman

I, Louis Wolfson III  
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically in order to comply with the Miami-Dade County requirements.

Additionally, a hard copy of the Campaign Treasurer's Reports must be printed from the Miami-Dade County Elections Department website and submitted by the reporting deadline with original signatures.

[Signature]  
Signature of Candidate or Chairperson

2/5/10  
Date

Day Time Telephone No: (305) 854-7100

Email Address: louisw@pinnaclehousing.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.

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ELECTIONS DEPARTMENT

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