

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

1. Full Name of Committee

Citizens for Reform for Miami-Dade County

Telephone

(305) 298-2717

Mailing Address (include city, state and zip code)

122 Camilo Avenue
Coral Gables, FL 33134

Street Address (include city, state and zip code)

122 Camilo Avenue
Coral Gables, FL 33134

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

Name of Affiliated or
Connected Organization

Mailing Address

Relationship

None

3. Area, Scope and Jurisdiction of the Committee

To influence the results of municipal elections within Miami-Dade County.

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

None

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

Jeffrey D. Porter

1586 South Goldeneye Lane
Homestead, FL 33035

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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MIAMI DADE
ELECTIONS

CHECK APPROPRIATE BOX:



Original Appointment of Treasurer



Reappointment of Treasurer



Deputy Treasurer

1. Committee or Organization

Citizens for Reform for Miami-Dade County

2. Account Number

3. Telephone

(305) 298-2717

4. Name of Treasurer or Deputy Treasurer

5. Email (optional)

Jeffrey D. Porter

6. Telephone (optional)

()

7. Mailing Address

1586 South Goldeneye Lane, Homestead, FL 33035

8. Street Address

1586 South Goldeneye Lane, Homestead, FL 33035

9. The following bank has been designated as the



Primary Depository



Secondary Depository

10. Name of Bank

Community Bank of Florida

11. Street Address

28801 SW 157th Avenue

12. City

Homestead

13. State

FL

14. Zip Code

33033

15. Signature of Chairman




16. Name of Chairman (Print or Type)

Frank R. May

Campaign Treasurer's Acceptance of Appointment

I, Jeffrey D. Porter

(Please Print or Type)

, do hereby accept the appointment as

treasurer or deputy treasurer for

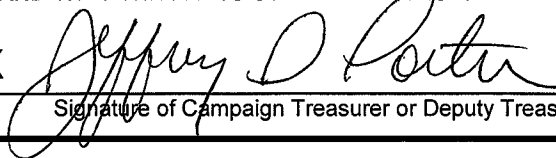
Citizens for Reform for Miami-Dade County

(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.

September 29, 2009

Date

Signature of Campaign Treasurer or Deputy Treasurer

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MIAMI DADE
ELECTIONS

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

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

Registered Agent and Office Information

Name **Frank R. May** Telephone **(305)298-2717**

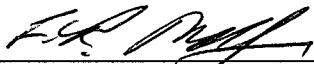
Street Address **122 Camilo Avenue**

City **Coral Gables** State **FL** Zip Code **33134**

Mailing Address **122 Camilo Avenue**

City **Coral Gables** State **FL** 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 Division of Elections.



Signature of Registered Agent

September 29, 2009

Date

Former Registered Agent and Office Information (for changes only)

Name **Not applicable.** Telephone

Street Address

City State Zip Code

Committee or Organization Information

Name of Committee or Organization
Citizens for Reform for Miami-Dade County

Street Address **122 Camilo Avenue** Telephone **(305) 298-2717**

City **Coral Gables** State **FL** Zip Code **33134**

Committee or organization is registered with:

- Division of Elections County **Miami-Dade** City



Signature of Chairperson

FRANK R. MAY

Print Name of Chairperson

September 29, 2009

Date

6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)

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 MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT

Full Name	Mailing Address	Committee Title or Position
Frank R. May	122 Camilo Avenue Coral Gables, FL 33134	Chairman

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: government and political reform
List Any Issues this Committee is Opposing: inappropriate policies, waste and excessive spending

9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party
 Not applicable

10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?
 Pro-rate distribution of residual funds based upon contributions

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


Name of Bank or Depository & Account Number	Mailing Address
Community Bank of Florida	28801 SW 157th Avenue Homestead, FL 33033

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
None			

STATE OF Florida COUNTY Miami-Dade COUNTY

I, Frank R. May, certify that the information in this Statement of Organization is complete, true and correct.

X 
 Signature of Chairman of Political Committee

10/16/09
 Date

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



Candidate (office sought): _____

Political Committee: Citizens for Reform for Miami-Dade County

Party Executive Committee: _____

Other: _____

I, FRANK R. MAY
(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.

F.R. May

Signature of Candidate or Chairperson

2/6/10

Date

Day Time Telephone No: 305-298-2717

Email Address: frank@frank.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.