

**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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PRISCILLA A. THOMPSON
CITY CLERK
CITY OF MIAMI, FL

CHECK APPROPRIATE BOX:

- Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization Miamians for Responsible Government	2. Account Number 0130018392	3. Telephone (786) 444-9762
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4. Name of Treasurer or Deputy Treasurer Angel J Ferrer Sr.	5. Email (optional)	6. Telephone (optional) (786) 444-9702
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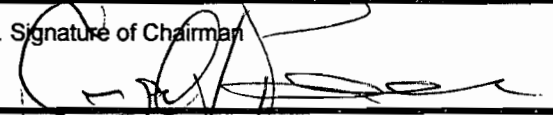
7. Mailing Address
16342 SW 93 Street Miami FL 33196

8. Street Address
SAME AS ABOVE

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

10. Name of Bank First Bank of Miami	11. Street Address 3650 SW 8th Street
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12. City Miami	13. State FL	14. Zip Code 33135
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15. Signature of Chairman 	16. Name of Chairman (Print or Type) Angel J Ferrer Sr
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Campaign Treasurer's Acceptance of Appointment

I, Angel J Ferrer Sr., do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for Miamians for Responsible Government
(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.

9/12/09 Date  Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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PRISCILLA A THOMPSON
CITY CLERK
CITY OF MIAMI, FL

1. Full Name of Committee

Miamians For Responsible Government

Telephone

786-444-9702

Mailing Address (include city, state and zip code)

16342 SW 93 Street Miami FL 33196

Street Address (include city, state and zip code)

16342 SW 93 Street Miami FL 33196

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
<hr style="border: 0; border-top: 1px solid black; width: 100%;"/>		

3. Area, Scope and Jurisdiction of the Committee

City of Miami

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

Supporting issues regarding fiscal responsibility and lowering of property taxes

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
Angel J Ferrer	16342 SW 93 Street Miami FL 33196	Chairman / 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
Angel J Ferrer	16342 SW 93 Street Miami, Florida 33196	Chairman/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
NONE			

8. List Any Issues this Committee is Supporting: Broad Range of Fiscal Issues
List Any Issues this Committee is Opposing: Excessive taxation and regulation in the City of Miami

9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party
 NO

10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?
 Doantion to any Non Profit organization in the City of Miami

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

Name of Bank or Depository & Account Number	Mailing Address
First Bank of Miami	3650 SW 8th Street Miami FL 33135

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	N/A		

STATE OF Florida Miami Dade COUNTY

I, Angel J Ferrer, certify that the information in this Statement of Organization is complete, true and correct.

X  Signature of Chairman of Political Committee
 Date 9/12/09

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 KRISTINE A. TOLSON
 CITY CLERK
 CITY OF MIAMI FL

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

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2009 SEP. 14 PM 1:00
RISCILLA A THOMPSON
CITY CLERK
CITY OF MIAMI, FL

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

Registered Agent and Office Information

Name ANGEL I. FERRELL SR. Telephone 786-444-9702

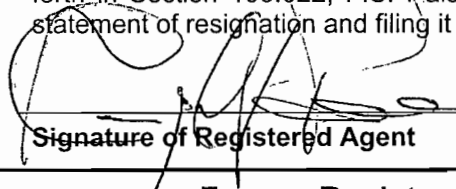
Street Address 16342 SW 93 ST

City Miami FL. State FLORIDA Zip Code 33196

Mailing Address PO BOX 830183

City MIAMI State FL Zip Code 33182

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

9/13/09

Date

Former Registered Agent and Office Information (for changes only)

Name N/A Telephone

Street Address

City State Zip Code

Committee or Organization Information

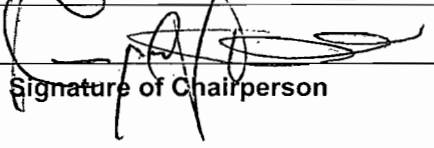
Name of Committee or Organization MIAMIANS FOR RESPONSIBLE GOVERNMENT

Street Address 16342 SW 93 ST Telephone

City Miami State FL. Zip Code 33196

Committee or organization is registered with:

- Division of Elections County City


Signature of Chairperson

9/13/09

Print Name of Chairperson

Date