

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

<b>1. Full Name of Committee</b>  Community Coalition		Telephone  305-588-5614
Mailing Address (include city, state and zip code) 2612 Taluga Drive. Miami, FL 33133		
Street Address (include city, state and zip code) 2612 Taluga Drive. Miami, FL 33133		
<b>2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)</b>		
Name of Affiliated or Connected Organization	Mailing Address	Relationship
N/A		
<b>3. Area, Scope and Jurisdiction of the Committee</b> Opposing a land development project in the City of Miami		
<b>4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)</b> City of Miami ballot initiative		
<b>5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)</b>		
Full Name	Mailing Address	Committee Title or Position
Barbara Pope	2612 Taluga Dr. Miami, FL 33133	Treasurer

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**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
Charles Corda	3540 Palmetto Ave. Miami, Fl. 33133	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
N/A			

**8. List Any Issues this Committee is Supporting:** None  
**List Any Issues this Committee is Opposing:** City of Miami Grove Bay Development

**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?**  
 Returned pro-rata to contributors or given to 501c3 charitable organization

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

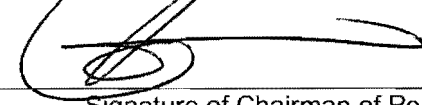
Name of Bank or Depository & Account Number	Mailing Address
Coconut Grove Bank 066004600 0106459106	2701 S. Bayshore Drive Miami, FL 33133

**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
N/A			

STATE OF Florida  Miami-Dade  COUNTY

I, Charles Corda, certify that the information in this Statement of Organization is complete, true and correct.

 Signature of Chairman of Political Committee

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Monday October 28, 2013

Barbara Pope  
Community Coalition  
2612 Taluga Dr.  
Miami, FL 33133

Dear Barbara,

I, Rafael Gutierrez, submit my resignation as the  
Chairman of Community Coalition. This resignation takes  
effect Monday October 28, 2013

Sincerely,



Rafael Gutierrez

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