

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**

(Section 106.022, F.S.)

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OFFICE OF THE 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: **Barbara Pope** Telephone: **305 588 5614**

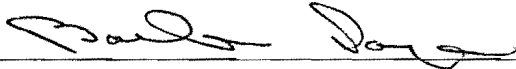
Street Address: **2612 Taluga Drive**

City: **Miami** State: **Fl.** Zip Code: **33133**

Mailing Address: **2612 Taluga Drive**

City: **Miami** State: **Fl.** Zip Code: **33133**

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 applicable filing officer.



Signature of Registered Agent

10/16/2013
Date

Former Registered Agent and Office Information (for changes only)

Name: _____ Telephone: _____

Street Address: _____

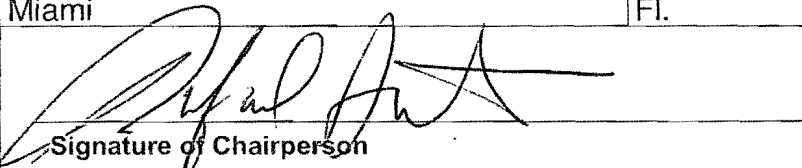
City: _____ State: _____ Zip Code: _____

Committee or Organization Information

Name of Committee or Organization: **Community Coalition**

Street Address: **2612 Taluga Drive** Telephone: **305 588 5614**

City: **Miami** State: **Fl.** Zip Code: **33133**



Signature of Chairperson

RAFAEL GUTIERREZ

Printed Name of Chairperson

10/16/13
Date

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

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CHECK APPROPRIATE BOX:

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Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization Community Coalition		2. Telephone (305) 588-5614	
3. Name of Treasurer or Deputy Treasurer Barbara Pope		4. Email (optional) bmpope@earthlink.net	
5. Telephone (optional) ()			
6. Mailing Address 2612 Taluga Drive, Miami, Fl., 33133			
7. Street Address 2612 Taluga Drive, Miami, Fl. 33133			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank Coconut Grove Bank		10. Street Address 2701 S. Bayshore Drive	
11. City Miami		12. State Fl.	13. Zip Code 33133
14. Signature of Chairman 		15. Name of Chairman (Print or Type) RAFAEL GUTIERREZ	

Campaign Treasurer's Acceptance of Appointment

I, Barbara Pope, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for Community Coalition
(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.

Oct. 14, 2013

**STATEMENT OF ORGANIZATION OF
POLITICAL COMMITTEE**

(PLEASE TYPE)

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CITY OF MIAMI, FL

1. Full Name of Committee Community Coalition	Telephone 305-588-5614
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Mailing Address (include city, state and zip code)

2612 Taluga Dr. Miami, FL 33133

Street Address (include city, state and zip code)

2612 Taluga Dr. Miami, FL 33133

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
N/A		

3. Area, Scope and Jurisdiction of the Committee
Opposing a land development project in the City of Miami

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

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
Barbara Pope	2612 Taluga Dr. Miami, FL 33133	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
Rafael Gutierrez	2800 Shipping Ave Miami, Fl. 31133	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			

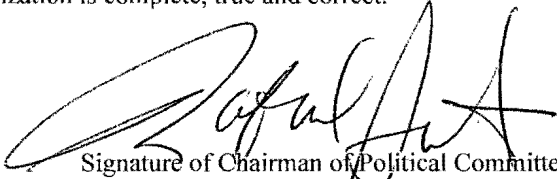
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STATE OF Florida
Dade COUNTY

Miami-

1. RAFAEL GUTIERREZ certify that the information in this Statement of

Organization is complete, true and correct.



10/15/13

Signature of Chairman of Political Committee

RAFAEL GUTIERREZ

10/16/13

Date

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