

**ELECTIONEERING
COMMUNICATIONS ORGANIZATION**

STATEMENT OF ORGANIZATION

(PLEASE TYPE)

02-11-16A11:56 RCVD

OFFICE USE ONLY

1. Full Name of Organization We Are Winter Park

Telephone

Mailing Address (include city, state and zip code)

PO Box 2283, Winter Park, FL 32790

Street Address (include city, state and zip code)

PO Box 2283, Winter Park, FL 32790

2. Affiliated or Connected Organizations

Name of Affiliated or Connected Organization	Mailing Address	Relationship
none		

3. Area, Scope and Jurisdiction of the Organization

Winter Park, FL

4. Identify by Name, Address & Position, the Custodian of Books & Accounts for the Organization

Full Name	Mailing Address	Street Address	Title or Position
Lenore Stephens	PO Box 2283, Winter Park, FL 32790-2283	PO Box 2283, Winter Park, FL 32790-2283	Treasurer

5. This Organization was formed (check applicable box): (Calendar quarters end the last day of March, June, September, and December.)

- As a newly created organization during the current calendar quarter.
 From an organization existing prior to the current calendar quarter.

6. List By Name, Mailing and Street Address, & Position, Other Principal Officers, including the treasurer and deputy treasurer, if any. Include the top-ranking officer's (e.g., chairperson) name and information.

Full Name	Mailing Address	Street Address	Title or Position
William Sullivan	PO Box 2283 Winter Park, FL 32790-2283	PO Box 2283 Winter Park, FL 32790-2283	Chairman
Lenore Stephens	PO Box 2283 Winter Park, FL 32790-2283	PO Box 2283 Winter Park, FL 32790-2283	Treasurer

7. In the Event of Dissolution, What Disposition will be Made of the Residual Funds?

Donate residual funds to Habitat for Humanity of Winter Park/Maitland, Inc. or prorated refund to donors.

8. List All Banks, Safety Deposit Boxes, or Other Depositories Used by this Organization for Electioneering Communications

Name of Bank or Depository	Mailing Address
Synovus Bank of Florida	450 S. Orange Avenue, Ste. 600 Orlando, FL 32801

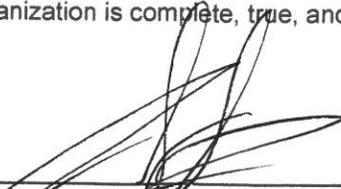
9. List All Reports Required to be Filed by this Organization with Federal Officials, & the Names, Addresses, & Positions of Such Officials, If Any

Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
N/A			

STATE OF Florida Orange COUNTY

I, William Sullivan, certify that the information in this Statement of

Organization is complete, true, and correct.

X 
Signature of Top-ranking Principal Officer of Organization

2/11/2016
Date

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

OFFICE USE ONLY

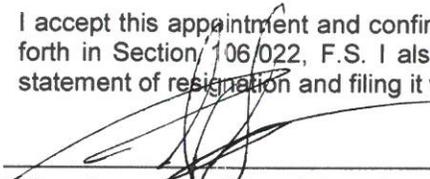
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- Original Appointment Change of Appointment
 Change of Mailing Address Change of Physical Address

Registered Agent and Office Information

Name William Sullivan		Telephone
Street Address PO Box 2283		
City Winter Park	State FL	Zip Code 32790-2283
Mailing Address PO Box 2283		
City Winter Park	State FL	Zip Code 32790-2283

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.



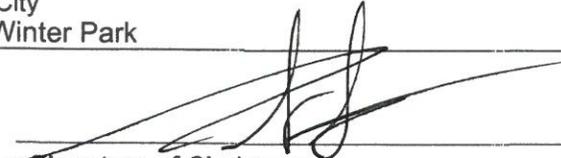
Signature of Registered Agent 2/11/2016
Date

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 We Are Winter Park		
Street Address PO Box 2283		Telephone
City Winter Park	State FL	Zip Code 32790-2283



Signature of Chairperson

William Sullivan 2/11/2016
Printed Name of Chairperson Date