

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

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JUL 08 2022

CITY OF MARCO ISLAND

**1. Full Name of Committee**

Keep Marco Island Free

Telephone  
970-389-5761

Mailing Address (include city, state and zip code)

Keep Marco Island Free  
PO Box 803  
Marco Island, FL 34146

Street Address (include city, state and zip code)

606 Bald Eagle Dr. #601  
Marco Island, FL 34145

**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	N/A	N/A

**3. Area, Scope and Jurisdiction of the Committee**

Political committee in opposition to the Ballot Referendum - Rental Registration Program for RSF Properties in the City of Marco Island

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

Political Action Committee

**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
Alys Macias	606 Bald Eagle Dr. #601 Marco Island, FL 34145	Chair
Claire Larson	4044 Sawgrass Ln. Naples, FL 34112	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
Alys Macias	606 Bald Eagle Dr. #601 Marco Island, FL 34145	Chair
Claire Larson	4044 Sawgrass Ln. Naples, FL 34112	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
N/A	N/A	N/A	N/A

**8. List Any Issues this Committee is Supporting:** N/A

**List Any Issues this Committee is Opposing:** Ballot Referendum - Rental Registration Program for RSF Properties in the City of Marco Island

**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?**

Will be donated to a Marco Island charity.

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

Name of Bank or Depository & Account Number	Mailing Address
Chase Bank	960 N. Collier Blvd Marco Island, FL 34145

**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	N/A	N/A	N/A

STATE OF Florida

Collier COUNTY

I, Alys Macias, certify that the information in this Statement of

Organization is complete, true and correct.

**X**

  
Signature of Chairman of Political Committee

07/07/2022

Date