STATEMENT OF

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FORM 1		ORGAN	IZATI	NC			Offic	e Use Only	
NAME OF COMMITTEE (in	full)	(Check if name is changed)		mple:If typing, r the lines.	type	12FE4N			
OCEANIAN	I COU	NTRIES PRO	DFESS	IONAL E	BASKI	ETBA	LL LE	EAGUE	
ADDRESS (number a	nd street)	1900 WEST OAKLAND	PARK BLVD						
(Check if a is changed		# 9961							
io onangoo	•)	FORT LAUDERDALE CITY				FL STATE ▲	33310	ZIP CODE	E A
COMMITTEE'S E-MA	AL ADDRES	SS							
(Check if a is changed		USPoliticalActionC	committees	@gmail.com			1 1		
		Optional Second E-Ma	ail Address						
(Check if a is changed	i)	D / Y Y Y Y							
2. DATE 13	2 20	2015							
3. FEC IDENTIFIC	CATION NU	MBER ▶	C005988	70					
4. IS THIS STATEM	MENT X	NEW (N)	R	AMENDE	D (A)				
I certify that I have e	examined this	s Statement and to the	best of my	knowledge and	belief it is	true, corre	ect and c	omplete.	
Type or Print Name	of Treasurer	JOSHUA LAROSE							
Signature of Treasure	er <i>JOSHU</i>	JA LAROSE		[Electronically F	<u>`iled]</u> □	ate	12 /		2015
NOTE: Submission of		ous, or incomplete inform	-					enalties of 2 U.S.	.C. §437g.
Office Use Only				For further infor Federal Election Toll Free 800-424 Local 202-694-11	Commission 1-9530	act:		EC FORM (Revised 06/2012	_

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE e Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b))	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
	ame of andidate		
	andidate arty Affiliati	Office on Sought: House Senate President	State
	,		District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ame of andidate		
P	arty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
P	olitical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Jo	int Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number C	
	3.		
	4.	FEC ID number C	

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Write or Type Committee Name	3	
OCEANIAN CC	UNTRIES PROFESSIONAL BASKETBA	LL LEAGUE
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	rship PAC Sponsor
NONE	<u> </u>	
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative L	eadership PAC Sponsor
 Custodian of Records: Identification books and records. 	ntify by name, address (phone number optional) and position of the person in p	ossession of committee
JOSHUA I	_AROSE	
Mailing Address	1900 WEST OAKLAND PARK BLVD.	
Mailing Address	# 9961	
	FORT LAUDERDALE FL 33310	
Title or Position	CITY STATE	ZIP CODE
PRESIDENT		768 - 6650
8. Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the rassistant treasurer).	name and address of
Full Name JOSHUA L	AROSE	
of Treasurer	1900 WEST OAKLAND PARK BLVD.	
Mailing Address	# 9961	
	FORT LAUDERDALE FL 33310	ZIP CODE
Title or Position TREASURER	CITY STATE	768 _{1 1} 6650 ₁

800

Telephone number

768

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FEC FOII	II I (NEVISEU UZIZUUS)	raye 🕶
Full Name of Designated Agent	JOSHUA LAROSE	
Mailing Address	1900 WEST OAKLAND PARK BLVD.	
Walling Address	# 9961	
	FORT LAUDERDALE FL 33310	- -
	CITY STATE	ZIP CODE
Title or Position CEO	Telephone number 800 – 7	768 6650
Banks or Other safety deposit bo Name of Bank, I	r Depositories: List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds. Depository, etc.	accounts, rents
safety deposit bo	Depository, etc. BANK OF AMERICA	accounts, rents
safety deposit bo	Depository, etc. BANK OF AMERICA 1701 BRICKELL AVENUE	accounts, rents
safety deposit bo Name of Bank, I	Depository, etc. BANK OF AMERICA 701 BRICKELL AVENUE	accounts, rents
safety deposit bo Name of Bank, I	Depository, etc. BANK OF AMERICA 1701 BRICKELL AVENUE	accounts, rents
safety deposit bo Name of Bank, I	Depository, etc. BANK OF AMERICA 701 BRICKELL AVENUE MIAMI FL 33131	zip code
safety deposit bo Name of Bank, I	Depository, etc. BANK OF AMERICA 701 BRICKELL AVENUE MIAMI FL 33131 CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. BANK OF AMERICA 701 BRICKELL AVENUE MIAMI FL 33131 CITY STATE	ZIP CODE
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. BANK OF AMERICA 701 BRICKELL AVENUE MIAMI CITY STATE Depository, etc.	ZIP CODE
Name of Bank, I	Depository, etc. BANK OF AMERICA 701 BRICKELL AVENUE MIAMI CITY STATE Depository, etc.	ZIP CODE
Name of Bank, I	Depository, etc. BANK OF AMERICA 701 BRICKELL AVENUE MIAMI CITY STATE Depository, etc.	ZIP CODE

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N5 H = C B

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: