

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

JM Family Enterprises, Inc. Political Action Committee

ADDRESS (Home or street) **100 Jim Moran Boulevard**

(Check if address is changed) **Deerfield Beach** **FL** **33442**

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER
9544208300

2. DATE **03 / 09 / 2004**

3. FEC IDENTIFICATION NUMBER **C C00240911**

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer **Gary Thomas**

Signature of Treasurer Electronically Filed by Gary Thomas Date **03 / 10 / 2004**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

5. TYPE OF COMMITTEE (Check One)

- (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. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a _____ (National, State (or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

JM Family Enterprises, Inc. _____

Mailing Address _____ 100 Jim Moran Boulevard _____

_____ Deerfield Beach _____ FL _____ 33442 - _____

CITY STATE ZIP CODE

Relationship _____ **Connected** _____

Type of Connected Organization:

- Corporation
- Membership Organization
- Corporation w/o Capital Stock
- Trade Association
- Labor Organization
- Cooperative

Write or Type Committee Name

JM Family Enterprises, Inc. Political Action Committee

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name John J. Whelan

Mailing Address 100 Jim Moran Boulevard

Deerfield Beach FL 33442 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 954 - 429 - 2010

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Gary Thomas

Mailing Address 100 Jim Moran Boulevard

Deerfield Beach FL 33442 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number _____ - _____ - _____

Full Name of Designated Agent Kiernan P. Moylan

Mailing Address 100 Jim Moran Boulevard

Deerfield Beach FL 33442 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Asst Secy/Treasurer Telephone number _____ - _____ - _____

