

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000003491

**FILED**  
**Jan 02, 2015**  
**Secretary of State**  
**CC4866230079**

**Entity Name:** CIGAR CITY CHAPTER, INC.

**Current Principal Place of Business:**

6920 NORTH DALE MABRY HIGHWAY  
TAMPA, FL 33614

**Current Mailing Address:**

6920 NORTH DALE MABRY HIGHWAY  
TAMPA, FL 33614

**FEI Number:** 59-3351047

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PATRICK HUNT, G.M.  
6920 NORTH DALE MABRY HIGHWAY  
TAMPA, FL 33614 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name MADISON, WILLIAM T  
Address 6920 NORTH DALE MABRY HIGHWAY  
City-State-Zip: TAMPA FL 33614

Title T  
Name FREEMAN, JUDY B  
Address 6920 N DALE MABRY HWY  
City-State-Zip: TAMPA FL 33614

Title S  
Name DIBIASSI, DOROTHY A  
Address 6920 NORTH DALE MABRY HIGHWAY  
City-State-Zip: TAMPA FL 33614

Title AD  
Name WATTENBARGER, FRANK  
Address 6920 NORTH DALE MABRY HIGHWAY  
City-State-Zip: TAMPA FL 33614

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JUDY B. FREEMAN

**TREASURER**

**01/02/2015**

Electronic Signature of Signing Officer/Director Detail

Date