	ncipal Place of Business: DALE MABRY HIGHWAY 3614		200241-	
Current Mai	ling Address:			
6920 NORT TAMPA, FL	H DALE MABRY HIGHWAY 33614			
FEI Number: 59-3351047			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
NELEMANS, R 6920 NORTH E TAMPA, FL 33	ALE MABRY HIGHWAY			
The above name	d entity submits this statement for the purpose of changing its	registered office or regis	tered agent, or both, in the State of Flo	orida.
SIGNATURE	E: RICHARD NELEMANS			03/02/2020
SIGNATURE	E: RICHARD NELEMANS Electronic Signature of Registered Agent			03/02/2020 Date
Officer/Dire	Electronic Signature of Registered Agent			
	Electronic Signature of Registered Agent	Title	т	
Officer/Dire	Electronic Signature of Registered Agent	Title Name	T BUITRAGO, LUIS	
Officer/Dire	Electronic Signature of Registered Agent ctor Detail : D			Date
Officer/Dire Title Name	Electronic Signature of Registered Agent ctor Detail : D BLAKELY, LARRY K 6920 NORTH DALE MABRY HIGHWAY	Name Address	BUITRAGO, LUIS	Date
Officer/Dire Title Name Address	Electronic Signature of Registered Agent ctor Detail : D BLAKELY, LARRY K 6920 NORTH DALE MABRY HIGHWAY	Name Address	BUITRAGO, LUIS 6920 NORTH DALE MABRY HIC	Date
Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : D BLAKELY, LARRY K 6920 NORTH DALE MABRY HIGHWAY TAMPA FL 33614	Name Address	BUITRAGO, LUIS 6920 NORTH DALE MABRY HIC	Date
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent ctor Detail : D BLAKELY, LARRY K 6920 NORTH DALE MABRY HIGHWAY TAMPA FL 33614 S	Name Address	BUITRAGO, LUIS 6920 NORTH DALE MABRY HIC	Date

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: LUIS BUITRAGO

Electronic Signature of Signing Officer/Director Detail

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003491

Entity Name: CIGAR CITY CHAPTER, INC.

03/02/2020 Date

FILED Mar 02, 2020

Secretary of State

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