## 2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# F13000003034

Entity Name: CIGAR ASSOCIATION OF AMERICA, INC.

# **Current Principal Place of Business:**

1100 G STREET, NW SUITE 1050 WASHINGTON, DC 20005-7405

# **Current Mailing Address:**

1100 G STREET, NW SUITE 1050 WASHINGTON, DC 20005-7405 US

## FEI Number: 13-5568722

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 S PINE ISLAND RD PLANTATION, FL 33324 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

# Officer/Director Detail :

	Title	PRESIDENT	Title	CHAIRMAN	
	Name	WILLIAMSON, CRAIG	Name	ESTADES, JAVIER	
	Address	900 US HWY 1 SUITE 203	Address	5900N. ANDREWS AVENUE	
	City-State-Zip:	JUPITER FL 33477	City-State-Zip:	FT. LAUDERDALE FL 33309	
	Title	VP	Title	DIRECTOR	
	Name	AUGUSTUS, JOSEPH	Name	CASEY, CHRISTOPHER L	
	Address	PO BOX 2230	Address	PO BOX 2230	
	City-State-Zip:	JACKSONVILLE FL 32203	City-State-Zip:	JACKSONVILLE FL 32203	
	Title	DIRECTOR	Title	DIRECTOR	
	Name	BOHNE, CHRISTOPHER	Name	EIROA, CHRISTIAN	
	Address	SUITE 7	Address	4650 NW 74 AVENUE	
			City-State-Zip:	MIAMI FL 33166	
	City-State-Zip:	MIAMI FL 33186	Title	DIRECTOR	
	Title	DIRECTOR FRANZBLAU, ALIX	Name	KALAMBOKAS, DIANE	
	Name			3001 GATEWAY CENTRE PARKWAY	
	Address	5401 HANGAR COURT	Address City-State-Zip:		
	City-State-Zip:	TAMPA FL 33634		PINELLAS PARK FL 33782	
			Continues o	on page 2	

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: CRAIG WILLIAMSON

PRESIDENT

01/10/2017

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

#### **Officer/Director Detail Continued :**

Title	DIRECTOR	Title
Name	GHILONI, PETER	Name
Address	P.O. BOX 2230	Address
City-State-Zip:	JACKSONVILLE FL 32203	City-State-Zip:
Title	DIRECTOR	Title
Name	GOLD, MICHAEL	Name
Address	3170 COMMERCIAL AVENUE	Address
City-State-Zip:	NORTHBROOK IL 60062	
Title	DIRECTOR	City-State-Zip:
Name	NEWMAN, ROBERT C	Title
Address	P.O. BOX 2030	Name
Citv-State-Zip:	TAMPA FL 33601	Address
		City-State-Zip:
Title	DIRECTOR	<b>T</b> .(1.)
Name	PEREZ-CARRILLO, ERNESTO II	Title
Address	984 SW FIRST STREET	Name
City-State-Zip:	MIAMI FL 33130	Address
Title	DIRECTOR	City-State-Zip:
Name	SHERMAN, WILLIAM	Title
Address	2200 FLETCHER AVENUE	Name
City-State-Zip:	FT. LEE NJ 07024	Address
Title	DIRECTOR	City-State-Zip:
Name	YOUNG, JIM	
Address	3001 GATEWAY CENTRE PARKWAY	Title
City-State-Zip:	PINELLAS PARK FL 33782	Name
		Address
Title		City-State-Zip:
Name	NEWMAN, ERIC	
Address	PO BOX 2030	Title
City-State-Zip:	TAMPA FL 33601	Name
Title	DIRECTOR	Address
Name	ALEJANDRO GERONIMO, ARIEL	City-State-Zip:
Address	8260 GREENLEAF CIRCLE	Title
City-State-Zip:	TAMPA FL 33615	Name
		Address
Title		City State Zie
Name	MILSTEIN, RONALD	City-State-Zip:
Address	714 GREEN VALLEY ROAD	Title
City-State-Zip:	GREENSBORO NC 27408	Name
		Address

Title	DIRECTOR			
Name	MCGEE, DANIEL P.			
Address	10900 NUCKOLS ROAD			
	SUITE 100			
City-State-Zip:	GLEN ALLEN VA 23060			
Title	DIRECTOR			
Name	MICHOLS, KELLY			
Address	2280 MOUNTAIN INDUSTRIAL BOULEVARD			
City-State-Zip:	TUCKER GA 30084			
Title	DIRECTOR			
Name	PERDOMO, NICHOLAS			
Address	5150 NW 167TH STREET			
City-State-Zip:	MIAMI LAKES FL 33014			
Title	DIRECTOR			
Name	ROEMER, HENRY C III			
Address	102 WEST THIRD STREET LOBBY LEVEL SUITE 200B			
City-State-Zip:	WINSTON-SALEM NC 27101			
Title	DIRECTOR			
Name	WILKEY, ROB			
Address	5900 N ANDREWS AVENUE 10TH FLOOR			
City-State-Zip:	FT. LAUDERDALE FL 33309			
Title	DIRECTOR			
Name	BROWN, RALPH			
Address	701 SOUTH BATTLEGROUND AVENUE			
City-State-Zip:	GROVER NC 28073			
Title	DIRECTOR			
Name	CASTANEDA, RENE			
Address	8107 NW 29 ST			
City-State-Zip:	MIAMI FL 33122			
Title	TREASURER			
Name	REYNOLDS, CRAIG			
Address	10900 NUCKOLS ROAD SUITE 100			
City-State-Zip:	GLENN ALLEN VA 23060			
Title	DIRECTOR			
Name	KEMPER, ARTHUR			
Address	5150 NW 167TH STREET			
City-State-Zip:	MIAMI LAKES FL 33014			