2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2005
Secretary of State

DOCUMENT# N01000003834

Entity Name: CIGAR FAMILY CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

2701 16TH STREET
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

PO BOX 2030
TAMPA, FL 33601

New Mailing Address:

FEI Number: 59-3735324 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOGGS, E. JACKSON
501 EAST KENNEDY BLVD SUITE 1700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: NEWMAN, ERIC M
Address: 2701 16TH STREET
City-St-Zip: TAMPA, FL 33605

Title: D ( ) Delete
Name: NEWMAN, ROBERT C
Address: 2701 16TH STREET
City-St-Zip: TAMPA, FL 33605

Title: D ( ) Delete
Name: FUENTE, CARLOS SR
Address: 2701 16TH STREET
City-St-Zip: TAMPA, FL 33605

Title: D ( ) Delete
Name: FUENTE, CARLOS JR
Address: 2701 16TH STREET
City-St-Zip: TAMPA, FL 33605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ERIC M NEWMAN D 03/30/2005

Electronic Signature of Signing Officer or Director Date