	FILE NOW: FILII				
* COF	DNPROFIT RPORATION JAL REPORT 1996	FLORIDA DEPART Sandra B Secretary DIVISION OF CO	of State		1-2
DÖCU 1. Corporatio	MENT # N9400 0	0002575 (8)			
CIGAR	CITY SHOOTERS, INC.				
Principal Place		Mailing Address		b indetral min läget dibili doll	a marria marria marria iriddia direk radar a direk 400k
8205 62ND S SARASOTA F		8205 62ND ST CT E1602 SARASOTA FL 34243			
2 Principal Pl	lace of Business	2a. Mailing Address		3. Date Incorporated or Qualified 05/18/1994	3a. Date of Last Report 04/19/1995
21 13951	7th Street Ste 11	26 P.O. Box 942	2	4. FEI Number 65-0458706	Applied For Not Applicable
Suite, Apt.	#, etc.	Sulte, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 Dade	city, FL	City & State 28 Dade City, F	-L	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Žiρ 24 33525	Country 25 USA	Zip 29 33526-0942 3	Country	8. This corporation has liability for	intangible tax under s. 199.032,
	9. Name and Address of Current	Registered Agent	USA	10. Name and Address of New F	Yes X No Registered Agent
1 50750	IAI III I I		81 Name		
	, JOHN H ND ST CT E1602		82 Street	Address (P.O. Box Number is Not Acceptate	ole)
	ND ST CT E1602 ITA FL 34243		83		
5, 44, 45			04		
			84 City		FL 85 Zip Code
 Pursuant or register 	to the provisions of Sections 617.0502 a red agent, or both, in the State of Florida	and 617,1508, Florida Statutes, t L. Such change was authorized b	the above-named co by the corporation's	progration submits this statement for the purboard of directors. I hereby accept the app	rpose of changing its registered office
iarimai wi	th, and accept the obligations of, Section	n 617.0503, Florida Statutes.			on and as registered agents (am
SIGNATURE	Signature, typeo or printed name of registered agent ar	nd title if applicable (NOTE: F	Registered Agent signature r	equired when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TIFLE NAME A	GUILLORY, RANDALL	DELETE	1.1 TITLE	PO	CERS AND DIRECTORS IN 12 Change X Addition Change X Addition
STREET ADDRESS	P.O. BOX 502 N/A		1.2 NAME 1.3 STREET ADDRESS	Ben Schwartz 10732 Dalton Ave	33
CITY-ST-ZIP	ODESSA FL 33556		1.4 CITY - ST - ZIP	Tampa, FL 33615	Ŭ N
TITLE	VP	DELETE	2 1 TITLE	VP 3	Change Addition
NAME	NEELY, EDWARD	••	2.2 NAME	Dohamit M. Cana In	
STREET ADDRESS	2632 SUNNY SIDE		23 SPREET ADDRESS	P.O . Box 155 36302	Lapsontive
CITY-ST-ZIP	SARASOTA FL 34239	Z Ã DELETE	4 CITY-ST-ZIP	Dade City, FL 33467	23342
NAME	LENARI, MARY	Worth	3 1 MLE 3 2 NAME	Daniel Vogel	Change (3 Addition
STREET ADDRESS	2027 PANAMA DR.		33 STREET ADDRESS	11411 Larkwood Way	
CHTY-ST-ZIP	SARASOTA FL 34234		34_CHY-31-212	Tampa, FL 33625	
TITLE	TD	[X] DELETE	41 IIIIE	T_70	☐ Change ※ Addition
NAME	LESTER, JOHN H		4. 2 NAME	Robert W. Owens	
STREET ADDRESS	8205 62ND ST. CT. E #1602 SARASOTA FL 34234		4.3 STREET ADDRESS	37411 Hickory Hill La	ne
CITY-ST-ZIP TITLE	C	DELETE	4 4 CITY - ST - ZIP 5 1 TITLE	Dade City, FL 33525	Change Addition
NAME	MARTUCCI, LOU		5 2 NAME		Et ontango Et Addition
STREET ADDRESS	P.O. BOX 1381 N/A		5 3 STREET ADDRESS		
CITY-ST-ZIP	SORRENTO, FL 32776		5 4 CITY-ST-ZIP		
TITLE C	HUDSON, DWAIN F	DELETE	6 t TITLE	20000184	L ⇒ → Change
NAME STREET ADDRESS	HUDSON, DWAIN F P.O. BOX 424 N/A		6 2 NAME	-06/03/36010	S6031
STREET ADDRESS	F.U. DUA 424 N/A		6 3 STREET ADDRESS	***81.25	// //

LACROSSE FL 32654 64 CITY - S1 - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if enanged, or on an attachment with an address.

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_	_		~		<i>.</i>	

CHTY-ST-ZIP

Robe
SIGNATURE AND TYPED OF A PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert W. Owens

4-1-96

(352) 567-3378

CIGAR CITY SHOOTERS, INC. Document # N94000002575(8)

ADDENDUM TO CORPORATION ANNUAL REPORT

1996

DIRECTORS

Lester, John H. 8205 62nd Street Court E. #1602 Sarasota, FL 34234

Martucci, Lou P.O. Box 1381 N/A Sorrento, FL 32776

Hudson, Dwain F. P.O. Box 424 N/A Lacrosse, FL 32654