

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

DOCUMENT# N09000006808

**FILED**  
**Jan 24, 2015**  
**Secretary of State**  
**CC8820041514**

**Entity Name:** CENTER FOR CRITICAL THINKING, INC.

**Current Principal Place of Business:**

C/O MARY ANNE COX  
146 RIDGE DR  
NAPLES, FL 34108

**Current Mailing Address:**

C/O MARY ANNE COX  
146 RIDGE DR  
NAPLES, FL 34108

**FEI Number: 27-0506803**

**Certificate of Status Desired: No**

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

GAZAREK, VIVIAN  
3985 VILLMOOR LN  
FORT MYERS, FL 33919 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            DP  
Name            COX, MARY ANNE  
Address        146 RIDGE DR  
City-State-Zip: NAPLES FL 34108

Title            DV  
Name            DONAHUE, JOSEPH  
Address        3971 GULF SHORE BLVD, PH 201  
City-State-Zip: NAPLES FL 34103

Title            DT  
Name            GAZAREK, VIVIAN  
Address        3985 VILLMOOR LN  
City-State-Zip: FORT MYERS FL 33919

Title            DS  
Name            GAZAREK, VIVIAN  
Address        3985 VILLMOOR LN  
City-State-Zip: FORT MYERS FL 33919

*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: VIVIAN GAZAREK**

**SECRETARY &  
TREASURER**

**01/24/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date