

2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004957

Entity Name: CENTER FOR INQUIRY, INC.**Current Principal Place of Business:**4011 S. MANHATTAN AVE.
APT # 139
TAMPA, FL 33611-1277**Current Mailing Address:**4011 S. MANHATTAN AVE.
APT # 139
TAMPA, FL 33611-1277 US**FEI Number:** 22-2306795**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**O'KEEFE, FREDRICK
4011 S. MANHATTAN AVE.
APT #139
TAMPA, FL 33611-1277 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 TREASURER, CFO
Name KARR, BARRY
Address 3965 RENSCH RD
City-State-Zip: AMHERST NY 14228

Title DIRECTOR
Name FRAZIER, KENDRICK
Address 944 DEER DR NE
City-State-Zip: ALBUQUERQUE NM 87122

Title SECRETARY
Name LITTLE, NICOLAS
Address 120 SWEET MEADOW FARM
City-State-Zip: CHARLOTTESVILLE VA 22903

Title CHAIRMAN
Name TABASH, EDWARD
Address 11500 WEST OLYMPIC BLVD
 SUITE 400
City-State-Zip: LOS ANGELES CA 90064

Title DIRECTOR
Name TRAMIEL, LEONARD
Address 767 ADDISON AVENUE
City-State-Zip: PALO ALTO CA 94301

Title DIRECTOR
Name KOSMIN, BARRY
Address TRINITY COLLEGE
 300 SUMMIT STREET
City-State-Zip: HARTFORD NJ 06106

Title DIRECTOR
Name ENGLER, BRIAN
Address 5918 CLERMONT LANDING COURT
City-State-Zip: BURKE VA 22015-2565

Title DIRECTOR
Name SHENG, Y. SHERRY
Address 5725 RIVER STREET
City-State-Zip: WEST LINN OR 97608

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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: BARRY KARR

CFO / TREASURER

04/25/2022

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title PRESIDENT, CEO
Name BLUMNER, ROBYN
Address 1231 TALBERT ST. SE
City-State-Zip: WASHINGTON DC 20020

Title DIRECTOR
Name COWAN, DAVID
Address 74 LILAC DRIVE
City-State-Zip: ATHERTON CA 94027

Title DIRECTOR
Name BHARDWAJ, VINOD
Address 130 KAI MALINA PKWY
City-State-Zip: LAHAINA HI 96761

Title DIRECTOR
Name SWEENEY, JULIA
Address 570 N. ARDEN BLVD
City-State-Zip: LOS ANGELES FL 90004

Title DIRECTOR
Name DAWKINS, RICHARD DR.
Address 14 BRADMORE ROAD
City-State-Zip: OXFORD OX2 6QP

Title DIRECTOR
Name THOMSON, ANDY
Address 1828 WAYSIDE PLACE
City-State-Zip: CHARLOTTESVILLE VA 22903

Title DIRECTOR
Name MAXWELL, WILLIAM
Address 287 DRIFTWOOD RD SE
City-State-Zip: ST. PETERSBURGH FL 33705