

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000011536

**Entity Name:** GLOBAL CENTER FOR PREPAREDNESS AND RESILIENCE, INC.

**FILED**  
**Jan 31, 2022**  
**Secretary of State**  
**8660472916CC**

**Current Principal Place of Business:**

2235 ENJOYA LANE  
MELBOURNE , FL 32901

**Current Mailing Address:**

2235 ENJOYA LANE  
MELBOURNE, FL 32901 US

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

BRAGDON, CLIFFORD R DR.  
2235 ENJOYA LANE  
MELBOURNE, FL 32901 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: CLIFFORD R. BRAGDON**

**01/31/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BRAGDON, CLIFFORD R DR.  
Address 2235 ENJOYA LANE  
City-State-Zip: MELBOURNE FL 32901

Title VP  
Name PARKER, FRANK  
Address 1231 GARFIELD STREET  
City-State-Zip: MELBOURNE FL 32935

Title VP  
Name GATEWOOD, ROZ  
Address 859 JEFFERY STREET  
411  
City-State-Zip: BOCA RATON FL 33487

Title DIR.  
Name BRAGDON, KATHERINE M AICP  
Address 4129 S. FOUR MILERUN DRIVE  
#204 APARTMENT #324  
City-State-Zip: ARLINGTON VA 22204

Title TREA  
Name KASICA, TOM  
Address 2210 FRONT STREET SUITE 301  
City-State-Zip: MELBOURNE FL 32901

*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: CLIFFORD R. BRAGDON**

**PRESIDENT**

**01/31/2022**

Electronic Signature of Signing Officer/Director Detail

Date