

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # N03000000181**

1. Entity Name  
**THE GOSPEL NOTES, INC.**



Principal Place of Business  
**1468 AZTECA LOOP  
THE VILLAGE, FL 32162**

Mailing Address  
**1468 AZTECA LOOP  
THE VILLAGE, FL 32162**



01062007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3753319**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**SPEICHER, WAYNE D  
1468 AZTECA LOOP  
THE VILLAGE, FL 32162**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPEICHER, WAYNE D 1468 AZTECA LOOP THE VILLAGES, FL 32162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HARDEN, PAM 1013 SIERRA BLANCA CT THE VILLAGES, FL 32159
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BLAKE, CHARLOTTE 1632 OLIVER LANE THE VILLAGES, FL 32159
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOCKMAN, DAVID 1943 CORDERO CR THE VILLAGES, FL 32159
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAANEN, JOYCE 1881 HARTFORD PATH THE VILLAGES, FL 32162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000003588597  
01/17/07-80079-017 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Wayne D. Speicher*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*1/8/07* *352-259-9934*  
Date Daytime Phone