

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000002525

Entity Name: GOSPEL SYSTEMS, INC.**Current Principal Place of Business:**2000 BONNER PLACE
SPRING HILL, TN 37174**Current Mailing Address:**P.O. BOX 521
SPRING HILL, TN 37174 US**FEI Number:** 46-5148796**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	DIRECTOR
Name	BRISTER, TIMOTHY
Address	2000 BONNER PLACE
City-State-Zip:	SPRING HILL TN 37174

Title	DIRECTOR
Name	GRIMES, JOHNNY
Address	521 HAMPTON DRIVE
City-State-Zip:	HOMEWOOD AL 35209

Title	PRESIDENT & EXECUTIVE DIRECTOR
Name	TOWNE, CHARLES
Address	2301 CRIPPLE CREEK DR
City-State-Zip:	PROSPER TX 75078

Title	SECRETARY
Name	HARE, NORMAN
Address	11212 N. 126TH E. AVE
City-State-Zip:	OWASSO OK 74055

Title	DIRECTOR
Name	WHITE, MICHAEL
Address	1352 S. ASPEN STREET
City-State-Zip:	LINCOLNTON NC 28092

Title	TREASURER
Name	VICKERY, ROBERT
Address	2709 HOMESTEAD N
City-State-Zip:	PONCA CITY OK 74604

Title	DIRECTOR
Name	BOGON, BRANDON
Address	2104 SWAN LAKE COVE
City-State-Zip:	BIRMINGHAM AL 35244

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: CHARLES TOWNE**EXECUTIVE DIRECTOR****02/26/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date