2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006628

Entity Name: THE GOSPEL COMPLEX, INC.

FILED May 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10097 CLEARY BLVD. SUITE 284 FORT LAUDERDALE, FL 33324 **New Mailing Address: Current Mailing Address:** 10097 CLEARY BLVD. SUITE 284 FORT LAUDERDALE, FL 33324 FEI Number: 20-5058406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RUCKER, CAROLINE A 1251 NW 101ST WAY PLANTATION, FL 33322 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MANSON, RICHARD Name: Name: Address: 2280 METRO CENTER BLVD. Address: City-St-Zip: NASHVILLE, TN 37228 City-St-Zip: Title: () Delete Title: () Change () Addition JONES, BOBBY DR. Name: Name: Address: 100 S. BIRCH SUITE 1001 Address: City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: Title: () Delete Title: () Change () Addition WALKER, ALBERTINA Name: Name: P.O. BOX 496-021 Address: Address: City-St-Zip: CHICAGO, IL 60649 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SCOTT, BRYANT Name: PO BOX 20847 Address: Address: City-St-Zip: INDIANAPOLIS, IN 46220 City-St-Zip: Title: () Delete Title: () Change () Addition COLE, ADA Name: Name: 10 NURMI DR Address: Address: FORT LAUDERDALE, FL 33311 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition NERENHAUSEN, MARK Name: Name: Address: 201 SW 5 AVE Address: FT LAUDERDALE, FL 33311 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RICHARD MANSON P 05/01/2008