

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 839141

FILED
Apr 28, 2009
Secretary of State

Entity Name: GOLDEN CORRAL CORPORATION

Current Principal Place of Business:

5151 GLENWOOD AVE
P.O. BOX 29502
RALEIGH, NC 27626

New Principal Place of Business:

5151 GLENWOOD AVE
5151 GLENWOOD AVENUE
RALEIGH, NC 27612

Current Mailing Address:

ATTN: TAX DEPT
P.O. BOX 29502
RALEIGH, NC 27626

New Mailing Address:

FEI Number: 56-1005071 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CTD () Delete
Name: MAYNARD, JAMES H.
Address: 5151 GLENWOOD AVE
City-St-Zip: RALEIGH, NC

Title: VP () Delete
Name: BELL, C L
Address: 5151 GLENWOOD AVE
City-St-Zip: RALEIGH, NC 27612

Title: S () Delete
Name: HEYWARD, ROBERT
Address: 5151 GLENWOOD AVE
City-St-Zip: RALEIGH, NC

Title: AS () Delete
Name: BALDWIN, DORIS F
Address: 5151 GLENWOOD AVE
City-St-Zip: RALEIGH, NC 27612

Title: AS () Delete
Name: LILLISTON, ANDREW J
Address: 5151 GLENWOOD AVE
City-St-Zip: RALEIGH, NC 27612

Title: D () Delete
Name: DELACOURT, PAUL A.
Address: 5151 GLENWOOD AVE.
City-St-Zip: RALEIGH, NC

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C. LAMAR BELL/ SJM

VP

04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date