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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 844375

1. Corporation Name JEFFERSON-PILOT COMMUNICATIONS COMPANY



Principal Place of Business 100 N. GREENE ST. GREENSBORO NC 27401 US
Mailing Address P. O. BOX 21008 GREENSBORO NC 27420 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/17/1979
4. FEI Number 56-0405830
5. Certificate of Status Desired
6. Election Campaign Financing
8. This corporation owes the current year Intangible Personal Property Tax.

2. Principal Place of Business 21
2a. Mailing Address 26
Suite, Apt. #, etc. 22
City & State 27
Zip 24 Country 25

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE V WEATHERLY, JOSEPH E.
NAME WEATHERLY, JOSEPH E.
STREET ADDRESS 100 N GREENE STREET
CITY-ST-ZIP GREENSBORO NC
TITLE VS MCALISTER, DANIEL K
NAME MCALISTER, DANIEL K
STREET ADDRESS 100 N. GREENE ST.
CITY-ST-ZIP CHARLOTTE NC
TITLE VD STILL, JOHN T., III
NAME STILL, JOHN T., III
STREET ADDRESS 100 N GREENE ST
CITY-ST-ZIP GREENSBORO NC
TITLE PD STONE, THERESA M
NAME STONE, THERESA M
STREET ADDRESS 100 NORTH GREENE STREET
CITY-ST-ZIP GREENSBORO NC
TITLE V COLLINS, DENNIS P
NAME COLLINS, DENNIS P
STREET ADDRESS 20450 NW 2ND AVE
CITY-ST-ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] SIGNATURE REQUIRED

Date Daytime Phone #

CR2E034 (11/98)