

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33432

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** GOLDEN CORRAL FRANCHISING SYSTEMS, INC.

**Current Principal Place of Business:**

5151 GLENWOOD AVENUE  
RALEIGH, NC 27612

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 56-1493583      **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: PD ( ) Delete  
Name: FOWLER, THEODORE M., JR.  
Address: 5151 GLENWOOD AVENUE  
City-St-Zip: RALEIGH, NC

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

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

Title: T ( ) Delete  
Name: WHITWORTH, J DALE  
Address: 5151 GLENWOOD AVE  
City-St-Zip: RALEIGH, NC 27612

**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:

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