

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 839141 (9)

1. Corporation Name
GOLDEN CORRAL CORPORATION



Principal Place of Business: **5151 GLENWOOD AVE, P.O. BOX 29502, RALEIGH NC 27626**

Mailing Address: **5151 GLENWOOD AVE, P.O. BOX 29502, RALEIGH NC 27626**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24)
 2a. Mailing Address (26-30)

3. Date Incorporated or Qualified: **09/19/1977**

4. FEI Number: **56-1005071**

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent (81-85)

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	TD	<input type="checkbox"/> DELETE
NAME	MAYNARD, JAMES H.	
STREET ADDRESS	5151 GLENWOOD AVE	
CITY-ST-ZIP	RALEIGH NC	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	FOWLER, THEODORE M., JR.	
STREET ADDRESS	5151 GLENWOOD AVE	
CITY-ST-ZIP	RALEIGH NC	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	HEYWARD, ROBERT	
STREET ADDRESS	5151 GLENWOOD AVE	
CITY-ST-ZIP	RALEIGH NC	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LEFTWICH, W.O.	
STREET ADDRESS	5151 GLENWOOD AVE	
CITY-ST-ZIP	RALEIGH NC	
TITLE	D	<input type="checkbox"/> DELETE
NAME	STATON, WILLIAM W.	
STREET ADDRESS	5151 GLENWOOD AVE	
CITY-ST-ZIP	RALEIGH NC	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DELACOURT, PAUL A.	
STREET ADDRESS	5151 GLENWOOD AVE.	
CITY-ST-ZIP	RALEIGH NC	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	C/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	VP of Finance	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	C. Lamar Bell	
2.3 STREET ADDRESS	5151 Glenwood Ave.	
2.4 CITY-ST-ZIP	Raleigh NC 27612	
3.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Doris F. Baldwin	
4.3 STREET ADDRESS	5151 Glenwood Ave.	
4.4 CITY-ST-ZIP	Raleigh NC 27612	
5.1 TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Andrew Lilliston Jr.	
5.3 STREET ADDRESS	5151 Glenwood Ave.	
5.4 CITY-ST-ZIP	Raleigh NC 27612	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.

SIGNATURE: _____

CR2E034 (10/97)