


2008 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Feb 05, 2008 08:00 AM
Secretary of State

DOCUMENT # 839141
 1. Entity Name
GOLDEN CORRAL CORPORATION



Principal Place of Business Mailing Address
5151 GLENWOOD AVE **ATTN: TAX DEPT**
P.O. BOX 29502 **P.O. BOX 29502**
RALEIGH, NC 27626 **RALEIGH, NC 27626**

DO NOT WRITE IN THIS SPACE



01252008 No Chg-P CR2E034 (11/05)

4. FEI Number 56-1005071	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

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8. 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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

000000815877
 02/14/08-30043-024 150.00

10. OFFICERS AND DIRECTORS

TITLE	CTD
NAME	MAYNARD, JAMES H.
STREET ADDRESS	5151 GLENWOOD AVE
CITY-ST-ZIP	RALEIGH, NC
TITLE	VP
NAME	BELL, C L
STREET ADDRESS	5151 GLENWOOD AVE
CITY-ST-ZIP	RALEIGH, NC 27612
TITLE	S
NAME	HEYWARD, ROBERT
STREET ADDRESS	5151 GLENWOOD AVE
CITY-ST-ZIP	RALEIGH, NC
TITLE	AS
NAME	BALDWIN, DORIS F
STREET ADDRESS	5151 GLENWOOD AVE
CITY-ST-ZIP	RALEIGH, NC 27612
TITLE	AS
NAME	LILLISTON, ANDREW J
STREET ADDRESS	5151 GLENWOOD AVE
CITY-ST-ZIP	RALEIGH, NC 27612
TITLE	D
NAME	DELACOURT, PAUL A.
STREET ADDRESS	5151 GLENWOOD AVE.
CITY-ST-ZIP	RALEIGH, NC

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: C. Lamar Bell *C. Lamar Bell* 1-28-08 919 781-9310
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #