

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

FILED

Jun 18 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 # 844375 (6)
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 27420-1008 US |
|---|--|

| | |
|---|--|
| 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country | 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country |
|---|--|

| | |
|--|---------------------------------------|
| 3. Date Incorporated or Qualified 10/17/1979 | 3a. Date of Last Report 04/01/1997 |
| 4. FEI Number 56-0405830 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

| | |
|---|--|
| 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 85 Zip Code FL |
|---|--|

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 | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|--|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V WEATHERLY, JOSEPH E. 100 N GREENE STREET GREENSBORO NC <input type="checkbox"/> DELETE | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VS MCAUSTER, DANIEL K 100 N. GREENE ST. CHARLOTTE NC <input type="checkbox"/> DELETE | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD STILL, JOHN T., III 100 N GREENE ST GREENSBORO NC <input type="checkbox"/> DELETE | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BLACKWELL, WILLIAM E 100 N GREENE ST GREENSBORO NC <input checked="" type="checkbox"/> DELETE | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V COLLINS, DENNIS P 20450 NW 2ND AVE MIAMI FL <input type="checkbox"/> DELETE | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), 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 _____
\$22/98 10-691-3317

Daniel K. McAllister
Senior Vice President
General Counsel
and Secretary

910/691-3317

Jefferson-Pilot
Communications Company
100 N. Greene St. (27401)
P.O. Box 21008
Greensboro, NC 27420
Fax 910/691-3222

Page 2

**Jefferson
Pilot
Communications**

June 1, 1998

Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Late Annual Report Filing

Dear Sir/Madam:

Enclosed please find our annual report filing and fee. We did not receive a form for 1998. When I called the Secretary of State's office, I was told that, to save time, I could take last year's form, change the appropriate information, and send it in with the fee. I was also informed that there would be no penalty because I did not receive a form for this year.

If my understanding is incorrect, or if you have any questions, please contact me at (336) 691-3273.

Thank you.

Sincerely,



Deborah Warren
Executive Secretary