

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

FILED  
May 12 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P32019 (2)

1. Corporation Name  
RAYCOM MANAGEMENT GROUP, INC.

Principal Place of Business  
P.O. BOX 33367  
CHARLOTTE NC 28233-3367

Mailing Address  
P.O. BOX 33367  
CHARLOTTE NC 28233-3367



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/05/1990	
21 Suite, Apt. #, etc.	22 City & State	23 Zip	24 Country	25 Suite, Apt. #, etc.	26 City & State
27 Zip	28 Country	29 Suite, Apt. #, etc.	30 City & State	31 Zip	32 Country
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 Name				82 Street Address (P.O. Box Number is Not Acceptable)	
83 City				84 Zip Code	
85 FL				86	
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

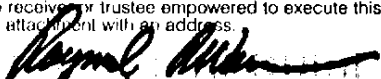
Signature typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C HAYES, JOHN	1.1 TITLE	C Hayes, John
NAME	RSATOWER SUITE 701, 201 MONROE ST	1.2 NAME	RSATOWER, Ste 710, 201 Monroe St.
STREET ADDRESS	MONTGOMERY AL	1.3 STREET ADDRESS	Montgomery, AL 36104
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D HAWKINS, KEN	2.1 TITLE	S Trapp, Melissa
NAME	RSATOWER SUITE 710, 201 MONROE ST	2.2 NAME	RSATOWER, Ste 710, 201 Monroe St.
STREET ADDRESS	MONTGOMERY AL	2.3 STREET ADDRESS	Montgomery, AL 36104
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	V HAINES, KEN	3.1 TITLE	
NAME	412 EAST BLVD.	3.2 NAME	
STREET ADDRESS	CHARLOTTE, NC 28202	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D SEFERT, JIM	4.1 TITLE	
NAME	RSATOWER SUITE 710, 201 MONROE ST	4.2 NAME	
STREET ADDRESS	MONTGOMERY AL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	PM RAYMOND R. WARREN	5.1 TITLE	
NAME	500 FIFTH AVE, SUITE 2330	5.2 NAME	
STREET ADDRESS	NEW YORK NY	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	S MCTEAR, PAUL	6.1 TITLE	T MCTear, Paul
NAME	RSATOWER SUITE 710, 201 MONROE ST	6.2 NAME	RSATOWER, Ste 710, 201 Monroe St.
STREET ADDRESS	MONTGOMERY AL	6.3 STREET ADDRESS	Montgomery, AL 36104
CITY-ST-ZIP		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)