

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 30, 2001 08:00 AM
Secretary of State

DOCUMENT # F98000004285

1. Entity Name
TANGER FACTORY OUTLET CENTERS, INC.

Principal Place of Business 3200 NORTHLINE AVE STE 360 GREENSBORO 27408	Mailing Address 3200 NORTHLINE AVE STE 360 GREENSBORO 27408
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number
56-1815473

Applied For Not Applicable

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

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 323012525 US	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

SIGNATURE _____ DATE **04/30/2001**

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	SVC	<input type="checkbox"/> Delete		TITLE	SVC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MARCHISELLO FRANK CJR			NAME	MARCHISELLO FRANK CJR		
STREET ADDRESS	1400 W. NORTHWOOD STREET			STREET ADDRESS	3200 NORTHLINE AVENUE, SUITE 360		
CITY-ST-ZIP	GREENSBORO NC 27408			CITY-ST-ZIP	GREENSBORO NC 27408		
TITLE	D	<input type="checkbox"/> Delete		TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ROBINSON THOMAS E			NAME	ROBINSON THOMAS E		
STREET ADDRESS	111 S. CLAVERT STREET			STREET ADDRESS	111 S. CLAVERT STREET		
CITY-ST-ZIP	BALTIMORE MD 21203			CITY-ST-ZIP	BALTIMORE MD 21202		
TITLE	D	<input type="checkbox"/> Delete		TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	AFRICK JACK			NAME	AFRICK JACK		
STREET ADDRESS	230 GLADES ROAD SUITE 220 W			STREET ADDRESS	1200 N. FEDERAL HWY. SUITE 211		
CITY-ST-ZIP	BOCA RATON FL 33431			CITY-ST-ZIP	BOCA RATON FL 33431		
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BENTON WILLIAM G			NAME			
STREET ADDRESS	915 W. 4TH ST.			STREET ADDRESS			
CITY-ST-ZIP	WINSTON-SALEM NC 27101			CITY-ST-ZIP			
TITLE	PD	<input type="checkbox"/> Delete		TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TANGER STEVEN B			NAME	TANGER STEVEN B		
STREET ADDRESS	150 E. 58TH STREET, SUITE 1201			STREET ADDRESS	110 E. 59TH STREET		
CITY-ST-ZIP	NEW YORK NY 10155			CITY-ST-ZIP	NEW YORK NY 10022		
TITLE	CD	<input type="checkbox"/> Delete		TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TANGER STANLEY K			NAME	TANGER STANLEY K		
STREET ADDRESS	1400 W. NORTHWOOD STREET			STREET ADDRESS	3200 NORTHLINE AVENUE, SUITE 360		
CITY-ST-ZIP	GREENSBORO NC 27408			CITY-ST-ZIP	GREENSBORO NC 27408		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Frank C. Marchisello Jr. **SVC** **04/30/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)