

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004285

Entity Name: TANGER FACTORY OUTLET CENTERS, INC.**Current Principal Place of Business:**3200 NORTHLINE AVE
STE 360
GREENSBORO, NC 27408**Current Mailing Address:**3200 NORTHLINE AVE
STE 360
GREENSBORO, NC 27408 US**FEI Number: 56-1815473****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324-2525 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :****Title** SVP AND CHIEF ACCOUNTING
OFFICER**Name** WILLIAMS, JAMES F**Address** 3200 NORTHLINE AVE
STE 360**City-State-Zip:** GREENSBORO NC 27408**Title** PRESIDENT & CHIEF EXECUTIVE
OFFICER**Name** TANGER, STEVEN B**Address** 3200 NORTHLINE AVENUE, SUITE 360**City-State-Zip:** GREENSBORO NC 27408**Title** EVP & CHIEF FINANCIAL OFFICER**Name** MARCHISELLO, FRANK C JR.**Address** 3200 NORTHLINE AVENUE, SUITE 360**City-State-Zip:** GREENSBORO NC 27408**Title** EVP, GENERAL COUNSEL &
SECRETARY**Name** PERRY, CHAD D**Address** 3200 NORTHLINE AVE
STE 360**City-State-Zip:** GREENSBORO NC 27408**Title** EVP & CHIEF OPERATING OFFICER**Name** MCDONOUGH, THOMAS E**Address** 3200 NORTHLINE AVE
STE 360**City-State-Zip:** GREENSBORO NC 27408

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JAMES F. WILLIAMS**SVP & CHIEF
ACCOUNTING OFFICER****03/30/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date