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PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **850632** (1)
1. Corporation Name
MAIDENFORM, INC.



Principal Place of Business: **90 PARK AVENUE NY NY 10016**
Mailing Address: **90 PARK AVENUE NY NY 10016**

3. Date Incorporated or Qualified: **10/07/1981**
3a. Date of Last Report: **04/28/1995**
4. FEI Number: **66-0201882**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
**GEIGER, ALLAN T
1300 GULF LIFE DRIVE
JACKSONVILLE FL 32207**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: **FL** 85 Zip Code

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: _____ (NOTE: Registered Agent signature required when registering) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	1.1 TITLE	600001797026
NAME	KANNER, ABRAHAM P	1.2 NAME	-04/28/96--01100--033
STREET ADDRESS	90 PARK AVE	1.3 STREET ADDRESS	***200.00
CITY-ST-ZIP	NEW YORK, NY 00000	1.4 CITY-ST-ZIP	
TITLE	VPT	2.1 TITLE	Vice President/C O O
NAME	GLAZER, IRA	2.2 NAME	
STREET ADDRESS	90 PARK AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK, NY 00000	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	Vice Chairman
NAME	MASKET, DAVID C	3.2 NAME	
STREET ADDRESS	90 PARK AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK, NY 00000	3.4 CITY-ST-ZIP	
TITLE	VPS	4.1 TITLE	
NAME	MASKET, STEVEN N.	4.2 NAME	
STREET ADDRESS	90 PARK AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK, NY 00000	4.4 CITY-ST-ZIP	
TITLE	P	5.1 TITLE	President
NAME	BRAWER, ROBERT	5.2 NAME	Elizabeth J. Coleman
STREET ADDRESS	90 PARK AVE	5.3 STREET ADDRESS	90 Park Avenue
CITY-ST-ZIP	NEW YORK, NY 00000	5.4 CITY-ST-ZIP	New York NY 10016
TITLE		6.1 TITLE	Vice President/Treasurer
NAME		6.2 NAME	Ron Koesterich
STREET ADDRESS		6.3 STREET ADDRESS	90 Park Avenue
CITY-ST-ZIP		6.4 CITY-ST-ZIP	New York NY 10016

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: _____
DATE: **4/22/96**

CR2E034 (2/95)

PM 4-26-96

MAIDENFORM, INC.

Addresses of the Corporation's Principal Officers

<u>NAME</u>	<u>OFFICE</u>
Elizabeth J. Coleman 90 Park Avenue New York, NY 10016	Chief Executive Officer, President and Chairman of the Board (212) 953-1400
David C. Masket 90 Park Avenue New York, NY 10016	Vice Chairman (212) 953-1400
Ira Glazer 90 Park Avenue New York, NY 10016	Executive Vice President-Chief Operating Officer (212) 953-1400
Steve N. Masket 90 Park Avenue New York, NY 10016	Executive Vice President-General Counsel and Secretary (212) 953-1400
Ron Koesterich 90 Park Avenue New York, NY 10016	Senior Vice President-Chief Financial Officer/Treasurer (212) 953-1400
Jodi Perlman 90 Park Avenue New York, NY 10016	Assistant Secretary (212) 953-1400

MAIDENFORM, INC.

Names and Business Addresses of the Corporation's Board of Directors:

<u>NAMES</u>	<u>ADDRESSES</u>
Elizabeth J. Coleman	90 Park Avenue, New York, NY 10016
Robert H. Stroup	1355 Peachtree Street, Atlanta, GA 30309
Catherine C. Brawer	90 Park Avenue, New York, NY 10016
Robert A. Brawer	90 Park Avenue, New York, NY 10016
David C. Masket	90 Park Avenue, New York, NY 10016
Melvin Cohen	3115 E. Georgia Avenue, Phoenix, AZ 85016
Jane Evans	8161 North 51st Place, Paradise Valley, AZ 85
Frank Magrone	165 South Main Street, Cortland, NY 13045
Gunther Spiesshofer	Marsstrasse 40, D-80335 Munich, Germany