


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 27, 2005 8:00 am**  
**Secretary of State**


01-27-2005 90049 019 \*\*\*150.00

<b>DOCUMENT # F93000005050</b>	
1. Entity Name WESTPOINT STEVENS INC.	

Principal Place of Business 507 W 10TH ST W POINT, GA 31833 US	Mailing Address P.O. BOX 71 WEST POINT, GA 31833 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40007581



01142005 Chg-P CR2E034 (10/03)

4. FEI Number 36-3498354	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	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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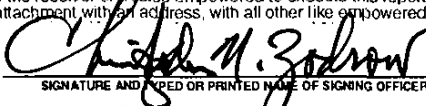
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS CHRISTOPHER N. ZODROW 507 WEST 10TH ST WEST POINT, GA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPCO FONTENOT, M L "CHIP" 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPCEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVCF SEARS, LESTER D 507 WEST 10TH STREET WEST POINT, GA 31833 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPT LANE, THOMAS M 507 WEST 10TH STREET WEST POINT, GA 31833 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 assignee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  Christopher N. Zodrow 1-24-05 706 645-4112

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

**WESTPOINT STEVENS INC.  
DIRECTORS**

Name and Business Address

**Hugh M. Chapman**  
Bank of America  
600 Peachtree Street N.E.  
16th Floor  
Atlanta GA 30308

**M. Katherine Dwyer**  
Skinklinic, Inc.  
800 B Fifth Avenue  
New York NY 10021

**Joseph R. Gladden, Jr.**  
210 Nacoochee Drive N.W.  
Atlanta GA 30305

**J. Hicks Lanier**  
Oxford Industries, Inc.  
222 Piedmont Avenue, N.W.  
Atlanta GA 30308

**John F. Sorte**  
Morgan Joseph & Co. Inc.  
600 Fifth Avenue 19<sup>th</sup> Floor  
New York NY 10020

**ATTACHMENT**

40007581  
#F930000005050

**ATTACHMENT**  
**WESTPOINT STEVENS INC.**  
**OFFICERS**

A0007581  
#F9360000 5050

Name and Business Address

**Arthur S. Birkins**  
President-Basic Bedding  
1185 Avenue of the Americas  
New York NY 10036

**Robert B. Dale**  
President-Bed and Bath  
1185 Avenue of the Americas  
New York NY 10036

**L. Foy Fisher, III**  
Vice President-Human Resources  
P. O. Box 71  
507 West 10th Street  
West Point, GA 31833

**Lorraine D. Miller**  
Senior Vice President-Finance and  
External Communications  
P. O. Box 133192  
Atlanta GA 30333

**M. Clayton (Clay) Humphries, Jr.**  
Vice President and Assistant Secretary  
P. O. Box 71  
507 West Tenth Street  
West Point, GA 31833

**John W. Hurston**  
Vice President-Bath Products Manufacturing  
1001 Towel Avenue  
Valley AL 36854

Name and Business Address

**Robert R. Lanier**  
Vice President-Bed Products  
Manufacturing  
500 West Cherry Road  
Clemson SC 29631

**J. Nelson Griffith**  
Senior Vice President & Controller  
P. O. Box 71  
507 West Tenth Street  
West Point, GA 31833

**James T. Duttera**  
Vice President-Cotton Purchasing  
401 Towel Avenue  
Valley AL 36854

**David R. Stone**  
Senior Vice President-Information  
Technology and Chief Information  
Officer  
500 West Cherry Road  
Clemson SC 29631