

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000006495

1. Entity Name  
**DAN RIVER FACTORY STORES, INC.**

Principal Place of Business

2291 MEMORIAL DRIVE  
DANVILLE VA 24541

Mailing Address

2291 MEMORIAL DRIVE  
DANVILLE VA 24541

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **54-1655132**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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 NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>WILLIAMS, RICHARD L</b> <b>2291 MEMORIAL DRIVE</b> <b>DANVILLE VA 24541</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CD</b> <b>LANIER JR, JOSEPH L</b> <b>2291 MEMORIAL DRIVE</b> <b>DANVILLE VA 24541</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>GOODRICH, HARRY L</b> <b>2291 MEMORIAL DRIVE</b> <b>DANVILLE VA 24541</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>SHEA, BARRY F</b> <b>2291 MEMORIAL DRIVE</b> <b>DANVILLE VA 24541</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>VAN DE VISSER, LARRY W</b> <b>2291 MEMORIAL DRIVE</b> <b>DANVILLE VA 24541</b>	<input checked="" type="checkbox"/> Delete
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"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Gary D. Waldman, Controller**

Date

Daytime Phone #

**FILED**  
**May 03, 2001 8:00 am**  
**Secretary of State**

05-03-2001 91103 010 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

ATTACHMENT TO FLORIDA UNIFORM BUSINESS REPORT  
DAN RIVER FACTORY STORES, INC.  
2001

attachment  
BH FA8000006495  
/ BOX 5389

Continuation - Listing of Officers and Directors

TITLE(S)	NAME	STREET ADDRESS	CITY	STATE	ZIP
V	Nicolas W. Fowler	2291 Memorial Drive	Danville	VA	24541
V	Denise Laussade	2291 Memorial Drive	Danville	VA	24541
T	Charles S. Bolt, Jr.	2291 Memorial Drive	Danville	VA	24541
CONT	Gary D. Waldman	2291 Memorial Drive	Danville	VA	24541