

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P11833

1. Corporation Name

FIELDCREST CANNON, INC.

Principal Place of Business

326 EAST STADIUM DRIVE
EDEN NC 27288

Mailing Address

4111 MINT WAY
DALLAS TX 75237
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

10/20/1986

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

56-0586036

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
CEO, P	HANSEN, CHARLES M.	4111 MINT WAY	DALLAS TX 75237
P SVP	GORDON, JEFFREY D. FINLAY, KEVIN M	4111 MINT WAY	DALLAS TX 75237
VP VPT	BAKER, CHRISTOPHER N. JAIME VASQUEZ	4111 MINT WAY	DALLAS TX 75237
VPC VP, GC, AS	WIEHDEJRE, RONALD M. STERLING, JOHN F	4111 MINT WAY	DALLAS TX 75237
S	STERLING, JOHN F. SANDERS, BRENDA A	4111 MINT WAY	DALLAS TX 75237
C	PAUSEN, G.D. DENNY, SHERRY B	326 E. STADIUM DR.	EDEN NC

8. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name

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

000003161470--4

Suite, Apt. #, Etc.

-03708700--01012--022

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

RICHARD J. MILOS

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

2/17/00

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-22-00

Daytime Phone #

214-333-3225

KE