

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P11833

1. Entity Name

FIELDCREST CANNON, INC.

**FILED**  
**May 16, 2001 8:00 am**  
**Secretary of State**

05-16-2001 90217 019 \*\*\*150.00

Principal Place of Business

326 EAST STADIUM DRIVE  
EDEN NC 27288

Mailing Address

4111 MINT WAY  
DALLAS TX 75237  
US

f u s s o d



DO NOT WRITE IN THIS SPACE

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 **56-0586036**

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

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

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	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
	CEOP			<input checked="" type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	HANSEN, CHARLES M.	4111 MINT WAY	DALLAS TX 75237						<input type="checkbox"/>	<input type="checkbox"/>
	SVP			<input checked="" type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	FINLAY, KEVIN M	4111 MINT WAY	DALLAS TX 75237						<input type="checkbox"/>	<input type="checkbox"/>
	VPT			<input checked="" type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	VASQUEZ, JAIME	4111 MINT WAY	DALLAS TX 75237						<input type="checkbox"/>	<input type="checkbox"/>
	VGCA			<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	STERLING, JOHN F	4111 MINT WAY	DALLAS TX 75237						<input type="checkbox"/>	<input type="checkbox"/>
	S			<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	SANDERS, BRENDA A	4111 MINT WAY	DALLAS TX 75237						<input type="checkbox"/>	<input type="checkbox"/>
	C			<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	DENOY, SHERRY B	326 E. STADIUM DR.	EDEN NC						<input type="checkbox"/>	<input type="checkbox"/>

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

SECRETARY

Date

Daytime Phone #

CR2E034 (10/00)