

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000004780

**Entity Name:** HANESBRANDS INC.

**Current Principal Place of Business:**

1000 E. HANES MILL RD.  
WINSTON-SALEM, NC 27105

**Current Mailing Address:**

1000 E. HANES MILL RD  
TAX DEPARTMENT  
WINSTON SALEM, NC 27105

**FEI Number:** 20-3552316

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST.  
TALLAHASSEE, FL 32301 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CEO, PRESIDENT  
Name NOLL, RICHARD A  
Address 1000 E. HANES MILL RD.  
City-State-Zip: WINSTON-SALEM NC 27105

Title DIRECTOR  
Name MULCAHY, PATRICK J  
Address 1000 E. HANES MILL RD.  
City-State-Zip: WINSTON-SALEM NC 27105

Title SECRETARY  
Name JOHNSON, JOIA M  
Address 1000 E. HANES MILL ROAD  
City-State-Zip: WINSTON SALEM NC 27105

Title TREASURER  
Name COOK, DONALD F  
Address 1000 E. HANES MILL RD.  
City-State-Zip: WINSTON-SALEM NC 27105

Title CFO  
Name MOSS, RICHARD D  
Address 1000 E. HANES MILL RD.  
City-State-Zip: WINSTON-SALEM NC 27105

Title DIRECTOR  
Name GRIFFIN, BOBBY J  
Address 1000 E. HANES MILL RD.  
City-State-Zip: WINSTON-SALEM NC 27105

Title CONTROLLER, CAO  
Name LEWIS, SCOTT  
Address 1000 E. HANES MILL ROAD  
City-State-Zip: WINSTON SALEM NC 27106

Title DIRECTOR  
Name JOHNSON, JAMES C.  
Address 1000 E. HANES MILL RD.  
City-State-Zip: WINSTON-SALEM NC 27105

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** SCOTT LEWIS

**CONTROLLER**

**04/22/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MATHEWS, JESSICA T.  
Address 1000 E. HANES MILL RD.  
City-State-Zip: WINSTON-SALEM NC 27105

Title DIRECTOR  
Name MOISON, FRANCK J.  
Address 1000 E. HANES MILL RD.  
City-State-Zip: WINSTON-SALEM NC 27105

Title DIRECTOR  
Name MORAN, ROBERT F.  
Address 1000 E. HANES MILL RD.  
City-State-Zip: WINSTON-SALEM NC 27105