

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23953

Entity Name: DOLLAR TREE STORES, INC.

Current Principal Place of Business:

500 VOLVO PKWY
CHESAPEAKE, VA 23320

Current Mailing Address:

500 VOLVO PARKWAY
CHESAPEAKE, VA 23320 US

FEI Number: 54-1387365

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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 DIRECTOR
Name PHILBIN , GARY
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title VP
Name MILLER , DEBORAH E.
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title SECRETARY
Name OLD, WILLIAM A. JR.
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title TREASURER, VP
Name DEAN , ROGER
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title VICE PRESIDENT/TAX/ASSISTANT SECRETARY
Name ELDER , JONATHAN L.
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title ASST. SECRETARY
Name TOTTEN-MEDLEY , SHAWNNTA
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title ASST. SECRETARY
Name FRANGIONE , DONNA
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title DIRECTOR, CHAIRMAN
Name SASSER , BOB
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Continues on page 2

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: TOTTEN-MEDLEY , SHAWNNTA

ASSISTANT SECRETARY 04/24/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, CFO
Name WAMPLER , KEVIN
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title VP, CONTROLLER, ASSISTANT SEC
Name MALLAS, KATHLEEN
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320