

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005551

FILED
Apr 24, 2012
Secretary of State

Entity Name: FAMILY DOLLAR SERVICES, INC.

Current Principal Place of Business:

10401 MONROE ROAD
MATTHEWS, NC 28105

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1017
CHARLOTTE, NC 282011017

New Mailing Address:

FEI Number: 56-1744955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CCEO
Name: LEVINE, HOWARD R
Address: 10401 MONROE ROAD
City-St-Zip: MATTHEWS, NC 28105

Title: PCOO
Name: BLOOM, MICHAEL K
Address: 10401 MONROE ROAD
City-St-Zip: MATTHEWS, NC 28105

Title: S
Name: SNYDER, JAMES C JR.
Address: 10401 MONROE ROAD
City-St-Zip: MATTHEWS, NC 28105

Title: T
Name: BURT, STEVEN E
Address: 10401 MONROE ROAD
City-St-Zip: MATTHEWS, NC 28105

Title: AS
Name: MACDONALD, BETH R
Address: 10401 MONROE ROAD
City-St-Zip: MATTHEWS, NC 28105

Title: D
Name: LEVINE, HOWARD R
Address: 10401 MONROE ROAD
City-St-Zip: MATTHEWS, NC 28105

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: BETH R. MACDONALD

AS

04/24/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date