

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 15, 2002 8:00 am
Secretary of State

04-15-2002 90037 032 ***150.00

0890704 AT

DOCUMENT # **G09440**

1. Entity Name
FAMILY DOLLAR STORES OF FLORIDA, INC.

Principal Place of Business P.O. BOX 1017 CHARLOTTE NC 28201-1017	Mailing Address P.O. BOX 1017 CHARLOTTE NC 28201-1017
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 62-1147034		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

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	

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	SV	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MAHONEY, GEORGE R JR			NAME			
STREET ADDRESS	10401 OLD MONROE RD			STREET ADDRESS			
CITY-ST-ZIP	MATTHEWS NC			CITY-ST-ZIP			
TITLE	P	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEVINE, HOWARD R			NAME			
STREET ADDRESS	10401 MONROE RD			STREET ADDRESS			
CITY-ST-ZIP	MATTHEWS NC 28201			CITY-ST-ZIP			
TITLE	DTC	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEVINE, LEON			NAME			
STREET ADDRESS	10401 OLD MONROE RD			STREET ADDRESS			
CITY-ST-ZIP	MATTHEWS NC			CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LAFARE, GILBERT A.			NAME			
STREET ADDRESS	10401 OLD MONROE RD.			STREET ADDRESS			
CITY-ST-ZIP	MATTHEWS NC			CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BURRIS, JANICE			NAME			
STREET ADDRESS	10401 OLD MONROE RD			STREET ADDRESS			
CITY-ST-ZIP	MATTHEWS NC			CITY-ST-ZIP			
TITLE	SVF	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SOWERS, C MARTIN			NAME			
STREET ADDRESS	10401 OLD MONROE RD			STREET ADDRESS			
CITY-ST-ZIP	MATTHEWS NC			CITY-ST-ZIP			

SEE ATTACHED SCHEDULE

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: Byron P. Causey Date: 4-1-02 (Mon) 847-16961
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/01)

Attachment
**FAMILY DOLLAR STORES CORPORATE STORE SUBSIDIARIES
OFFICERS**

#G 09440

NAME	TITLE	BUSINESS ADDRESS
Leon Levine 2+2-48-5030	Chairman of the Board/Director	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
Howard R. Levine 239-74-6872	President/Chief Executive Officer	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
R. James Kelly, Jr. 424-58-3135	Vice Chairman-Chief Financial and Administrative Officer	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
George R. Mahoney, Jr. 084-34-7804	Executive Vice President/Secretary	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
R. David Alexander, Jr. 409-06-3256	Executive Vice President - Chief Operating Officer	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
C. Martin Sowers 244-11-5178	Sr. Vice President/Finance	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
Bruce E. Barkus 081-44-8705	Sr. Vice President - Store Operations	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
Gilbert A. LaFare 382-44-5667	Sr. Vice President - Real Estate	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
Clay Teter 461-11-2484	Vice President - Real Estate	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
Janice B. Burris 246-76-1553	Assistant Secretary	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
John G. Clifford 317-48-9464	Assistant Secretary	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
Thomas E. Schoenheit 128-42-0693	Assistant Secretary	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
Dayton W. Powell 248-68-4589	Assistant Treasurer	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
Bryan P. Causey 238-41-2559	Vice President - Finance	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017

DIRECTORS

Howard R. Levine 239-74-6872	President & CEO	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
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