

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 16, 2004 8:00 am
Secretary of State

03-16-2004 90029 027 ***150.00

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	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E034 (11/03)

4. FEI Number 62-1147034		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV MAHONEY, GEORGE R JR 10401 OLD MONROE RD MATTHEWS NC <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEVINE, HOWARD R 10401 MONROE RD MATTHEWS NC 28201 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTC LEVINE, LEON 10401 OLD MONROE RD MATTHEWS NC <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LAFARE, GILBERT A. 10401 OLD MONROE RD. MATTHEWS NC <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BURRIS, JANICE 10401 OLD MONROE RD MATTHEWS NC <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVF SOWERS, C MARTIN 10401 OLD MONROE RD MATTHEWS NC <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

SEE ATTACHED SCHEDULES

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bryan P. Causey 704-847-6961

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____

*Attachment
309210*

**FAMILY DOLLAR STORES CORPORATE STORE SUBSIDIARIES
OFFICERS**

NAME	TITLE	BUSINESS ADDRESS
Howard R. Levine 239-74-6872	President/Chief Executive Officer/ Director	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 081-44-6705	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
Daylon 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 & Chief Executive Officer/ Director	10401 Old Monroe Rd. P.O. Box 1017 Charlotte, NC 28201-1017
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