2008 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State 03-26-2008 90020 024 ***150.00 DOCUMENT # G09440 FAMILY DOLLAR STORES OF FLORIDA, INC. Principal Place of Business Mailing Address P.O. BOX 1017 P.O. BOX 1017 40051877 CHARLOTTE, NC 28201-1017 CHARLOTTE, NC 28201-1017 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 10401 Old Monroe Road Suite, Apt. #, etc. Suite, Apt. #, etc 03132008 Chg-P CR2E034 (12/06) Applied For City & State City & State 4. FEI Number Matthews, NC Not Applicable 62-1147034 Zip Country \$8.75 Additional Country 5. Certificate of Status Desired 28105 **USA** Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET **SUITE 105** TALLAHASSEE, FL 32301 Zip Code City 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) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. XI Channe ☐ Addition Delete TITLE LEVINE, HOWARD R NAME NAME 10401 Old Monroe Road 10401 MONROE RD STREET ADDRESS STREET ADDRESS Matthews, NC 28105 CITY-ST-ZIP CITY-ST-ZIP MATTHEWS, NC 28201 TITLE ☐ Change X Addition ☑ Delete TITLE NAME LAFARE, GILBERT A. NAME Kelly, R. James 10401 Old Monroe Road STREET ADDRESS 10401 OLD MONROE RD. STREET ADDRESS Matthews, NC 28105 MATTHEWS, NC CITY-ST-ZIP CITY-ST-7IP V/S Change X Addition X Delete TITLE TITLE BURRIS-JANICE-NAME NAME . Kelley, Janet G. --10401 Old Monroe, Road STREET ADDRESS 10401 OLD MONROE RD STREET ADDRESS Matthews, NC 28105 CITY-ST-ZIP MATTHEWS, NO CITY-ST-7iP X Delete TITLE T - Asst. Treasurer (Acting Treasurer) ☐ Change X Addition TITLE SOWERS, C MARTIN NAME NAME Burt, Steven E. STREET ADDRESS 10401 OLD MONROE RD STREET ADDRESS 10401 Old Monroe Road CITY-ST-ZIP Matthews, NC 28105 CITY-ST-ZIP MATTHEWS, NC ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Janet G. Kelley/Sr. VP, General Counsel & Sec. 3/9/b8 (704) 847-6961

CITY-ST-ZIP

CITY-ST-ZIP

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Mar 26, 2008 8:00 am