

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G09440

**FILED  
Jan 27, 2016  
Secretary of State  
CC7110398769**

**Entity Name:** FAMILY DOLLAR STORES OF FLORIDA, INC.

**Current Principal Place of Business:**

10401 MONROE ROAD  
MATTHEWS, NC 28105

**Current Mailing Address:**

P.O. BOX 1017  
CHARLOTTE, NC 28201-1017 US

**FEI Number: 62-1147034**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 VP - TAX  
Name ELDER, JONATHAN  
Address 10401 MONROE ROAD  
City-State-Zip: MATTHEWS NC 28105

Title SVP  
Name ROGERS, ROBERT L  
Address 10401 MONROE ROAD  
City-State-Zip: MATTHEWS NC 28105

Title VP, ASST. GENERAL COUNSEL &  
ASST. SECRETARY  
Name SCHOENHEIT, THOMAS E  
Address 10401 MONROE ROAD  
City-State-Zip: MATTHEWS NC 28105

Title VP  
Name MILLER, DEBORAH  
Address 10401 MONROE ROAD  
City-State-Zip: MATTHEWS NC 28105

Title PRESIDENT  
Name SULLIVAN, BARRY W  
Address 10401 MONROE ROAD  
City-State-Zip: MATTHEWS NC 28105

Title EVP - CHIEF FINANCIAL OFFICER &  
DIRECTOR  
Name WAMPLER, KEVIN  
Address 10401 MONROE ROAD  
City-State-Zip: MATTHEWS NC 28105

Title SVP, GENERAL COUNSEL,  
SECRETARY, DIRECTOR  
Name OLD, WILLIAM A JR.  
Address 10401 MONROE ROAD  
City-State-Zip: MATTHEWS NC 28105

Title ASST. SECRETARY  
Name BOSCIA, SANDRA L  
Address 10401 MONROE ROAD  
City-State-Zip: MATTHEWS NC 28105

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*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: SANDRA L. BOSCIA**

**ASSISTANT SECRETARY 01/27/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASST. SECRETARY  
Name CARLEY, LINDE  
Address 10401 MONROE ROAD  
City-State-Zip: MATTHEWS NC 28105

Title DIRECTOR  
Name PHILBIN, GARY  
Address 10401 MONROE ROAD  
City-State-Zip: MATTHEWS NC 28105