

1.) CORPORATION NAME:

DOLLAR TREE STORES, INC.

DUE DATE: **10/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**WILLIAM A OLD JR
DOLLAR TREE STORES, INC.
500 VOLVO PARKWAY**

SCC ID NO: **02938496**

CHESAPEAKE, VA

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 5,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

CHESAPEAKE CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 500 VOLVO PKWY

CITY/ST/ZIP: CHESAPEAKE, VA 23320

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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|-----------------|----------------------|---|--|
| NAME: | GARY PHILBIN | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 500 VOLVO PKWY | | |
| CITY/ST/ZIP/CO: | CHESAPEAKE, VA 23320 | | |
| NAME: | ROGER DEAN | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VP/T/AS | | |
| ADDRESS: | 500 VOLVO PKWY | | |
| CITY/ST/ZIP/CO: | CHESAPEAKE, VA 23320 | | |
| NAME: | DEBORAH E MILLER | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 500 VOLVO PKWY | | |
| CITY/ST/ZIP/CO: | CHESAPEAKE, VA 23320 | | |
| NAME: | KEVIN WAMPLER | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | CFO | | |
| ADDRESS: | 500 VOLVO PARKWAY | | |
| CITY/ST/ZIP/CO: | CHESAPEAKE, VA 23320 | | |
| NAME: | CATHY J. EICHELBAUM | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | ASST SECRETARY | | |
| ADDRESS: | 500 VOLVO PARKWAY | | |
| CITY/ST/ZIP/CO: | CHESAPEAKE, VA 23320 | | |
| NAME: | WILLIAM A. OLD, JR. | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | SECRETARY | | |
| ADDRESS: | 500 VOLVO PKWY | | |
| CITY/ST/ZIP/CO: | CHESAPEAKE, VA 23320 | | |

NAME: BOB L SASSER OFFICER DIRECTOR
TITLE: CHAIRMAN
ADDRESS: 500 VOLVO PKWY
CITY/ST/ZIP/CO: CHESAPEAKE, VA 23320

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

| | | |
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| <u>/s/ CATHY J. EICHELBAUM</u> | <u>CATHY J. EICHELBAUM, ASST</u> | <u>8/30/2013</u> |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | SECRETARY PRINTED NAME AND CORPORATE TITLE | DATE |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.