

1.) CORPORATION NAME:

DOLLAR TREE AIR, INC.

DUE DATE: **7/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**WILLIAM A OLD JR
1700 DOMINION TOWER
999 WATERSIDE DR**

SCC ID NO: **05430590**

NORFOLK, VA 23510

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

NORFOLK 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.

NAME:	MACON F BROCK JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/CEO		
ADDRESS:	500 VOLVO PKWY		
CITY/ST/ZIP/CO:	CHESAPEAKE, VA 23320		

NAME:	BOB L SASSER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/D		
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:	VICE PRESIDENT		
ADDRESS:	500 VOLVO PARKWAY		
CITY/ST/ZIP/CO:	CHESAPEAKE, VA 23320		

NAME:	JONATHAN L ELDER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/ASST SEC		
ADDRESS:	500 VOLVO PKWY		
CITY/ST/ZIP/CO:	CHESAPEAKE, VA 23320		

NAME:	KATHLEEN MALLAS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	500 VOLVO PARKWAY		
CITY/ST/ZIP/CO:	CHESAPEAKE, VA 23320		

NAME:	JAMES A GORRY, III	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SEC/DIR		
ADDRESS:	500 VOLVO PKWY		
CITY/ST/ZIP/CO:	CHESAPEAKE, VA 23320		

NAME: CATHY J. EICHELBAUM TITLE: ASST SECRETARY ADDRESS: 500 VOLVO PARKWAY CITY/ST/ZIP/CO: CHESAPEAKE, VA 23320	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: SHAWNNTA TOTTEN TITLE: ASST SECRETARY ADDRESS: 500 VOLVO PARKWAY CITY/ST/ZIP/CO: CHESAPEAKE, VA 23320	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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.

/s/ CATHY J. EICHELBAUM SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CATHY J. EICHELBAUM, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	6/13/2012 DATE
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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.