2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000028

Entity Name: SAFETY HOLDING, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
200 HUNT VALLEY ROAD NEW KENSINGTON, PA 15068				
Current Mailing Address:			New Mailing Address:	
200 HUNT VALLEY ROAD NEW KENSINGTON, PA 15068				
FEI Number: 2	25-1823511	FEI Number Applied For () FEI Nur	mber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
C T 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 Election Campaign Financing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PCEO () C SWANK, RUSSE 200 HUNT VALLE NEW KENSINGTO	EY ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () E PARKER, TOM 541 HIGH STREE NAPOLEON, OH		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () E PARKER, REX 1005 WESTCHES NAPOLEON, OH		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	T () E BRENT, DALE 0-668 COUNTY F ABERDEEN, MD		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S () E DEPMAN, JOHN 1508 ROLLING R ABERDEEN, MD	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	AS () E FUHRMAN, CHAE 200 ABBY LANE FREEPORT, PA		Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHAD B FUHRMAN AS 04/29/2008