

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001054

Entity Name: SAFEHOLD SPECIAL RISK, INC.**Current Principal Place of Business:**100 SUMMIT LAKE DRIVE, SUITE 400
VALHALLA, NY 10595**Current Mailing Address:**100 SUMMIT LAKE DRIVE, SUITE 400
VALHALLA, NY 10595 US**FEI Number:** 20-8356926**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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	DIRECTOR
Name	PAULK, JOHN IRVINE III
Address	100 SUMMIT LAKE DRIVE, SUITE 400
City-State-Zip:	VALHALLA NY 10595

Title	TREASURER/CFO
Name	BOWLER, EDWARD J.
Address	100 SUMMIT LAKE DRIVE, SUITE 400
City-State-Zip:	VALHALLA NY 10595

Title	VP
Name	HAWKINS, TINA
Address	100 SUMMIT LAKE DRIVE, SUITE 400
City-State-Zip:	VALHALLA NY 10595

Title	PRESIDENT
Name	PRICHARD, TIMOTHY
Address	100 SUMMIT LAKE DRIVE, SUITE 400
City-State-Zip:	VALHALLA NY 10595

Title	SECRETARY
Name	NEWBORN, ERNEST J. II
Address	100 SUMMIT LAKE DRIVE, SUITE 400
City-State-Zip:	VALHALLA NY 10595

Title	DIRECTOR
Name	NEWBORN, ERNEST J. II
Address	100 SUMMIT LAKE DRIVE, SUITE 400
City-State-Zip:	VALHALLA NY 10595

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: ERNEST J. NEWBORN II**SECRETARY****06/15/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date