

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005845

FILED
Apr 21, 2009
Secretary of State

Entity Name: SAFETRAN SYSTEMS CORPORATION

Current Principal Place of Business:

2400 NELSON MILLER PARKWAY
LOUISVILLE, KY 40223

New Principal Place of Business:

Current Mailing Address:

2400 NELSON MILLER PARKWAY
LOUISVILLE, KY 40223

New Mailing Address:

FEI Number: 61-0720011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Title: VSD () Delete
Name: WHITFIELD, ELEANOR K
Address: P.O. BOX 85 FOUNDRY LN
City-St-Zip: WILTSHIRE, UNITED KINGDOM, SN15 1RT

Title: DP () Delete
Name: ROSS, CHARLES L
Address: 2400 NELSON MILLER PARKWAY
City-St-Zip: LOUISVILLE, KY 40223

Title: S () Delete
Name: TURNER, PATRICIA
Address: 238 WESTON RD
City-St-Zip: WESTON, CT 06883

Title: V () Delete
Name: KERR, PAUL R
Address: 2400 NELSON MILLER PKWY
City-St-Zip: LOUISVILLE, KY 40223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: RIDDETT, KEVIN
Address: 2400 NELSON MILLER PARKWAY
City-St-Zip: LOUISVILLE, KY 40223

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAUL KERR

VP

04/21/2009

Electronic Signature of Signing Officer or Director

Date