

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001895

Entity Name: HONEYWELL SAFETY PRODUCTS USA, INC.**Current Principal Place of Business:**855 S. MINT STREET
CHARLOTTE, NC 28202**Current Mailing Address:**855 S. MINT STREET
CHARLOTTE, NC 28202 US**FEI Number: 54-2083444****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 TREASURER

Name HUBER, THILO

Address 855 S. MINT STREET

City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR

Name CAVALLARO, DAVID

Address 855 S. MINT STREET

City-State-Zip: CHARLOTTE NC 28202

Title ASSISTANT VICE PRESIDENT-TAXES

Name GOLDSTEIN, BENJAMIN E.

Address 855 S. MINT STREET

City-State-Zip: CHARLOTTE NC 28202

Title DIRECTOR, PRESIDENT

Name GARCEAU, MICHAEL

Address 1985 DOUGLAS DRIVE NORTH
SUITE HBT

City-State-Zip: GOLDEN VALLEY MN 55422

Title DIRECTOR, SECRETARY

Name HELMS, LYNDSY

Address 855 S. MINT STREET

City-State-Zip: CHARLOTTE NC 28202

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: THILO HUBER**TREASURER****04/23/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date