

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2001 8:00 am
Secretary of State

03-21-2001 90044 034 ***150.00

DOCUMENT # 830525

1. Entity Name
SAFECO INSURANCE COMPANY OF PENNSYLVANIA



Principal Place of Business REGULATORY COMPLIANCE SAFECO PLAZA SEATTLE WA 98185	Mailing Address REGULATORY COMPLIANCE SAFECO PLAZA SEATTLE WA 98185
--	--

A0035467



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business C/O CT CORPORATION SYSTEM Suite, Apt. #, etc. 1635 MARKET STREET City & State PHILADELPHIA, PA	3. Mailing Address Suite, Apt. #, etc. City & State
---	---

Zip 19103-2217	Country USA	Zip	Country
--------------------------	-----------------------	-----	---------

4. FEI Number 23-2640501	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent
FLORIDA INSURANCE COMMISSIONER
THE CAPITAL
TALLAHASSEE FL 32304

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STODDARD, W. RANDALL 4333 BROOKLYN AVENUE, N.E. SEATTLE WA 98105 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV LEBO, WILLIAM T 4333 BROOKLYN AVENUE, N.E. SEATTLE WA 98105 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD PIERSON, RODNEY A 4333 BROOKLYN AVENUE, N.E. SEATTLE WA 98105 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRVD CHAPMAN, DONALD S 4333 BROOKLYN AVENUE NE SEATTLE WA 98101 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT BAUER, STEPHEN C 4333 BROOKLYN AVENUE, N.E. SEATTLE WA 98105 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS EGAN, RAY M 4333 BROOKLYN AVENUE, N.E. SEATTLE WA 98105 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D MICHAEL S. McGAVICK 4333 BROOKLYN AVE NE SEATTLE, WA 98105-9903 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV/D SEATTLE, WA 98105-9903 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV/S/D SEATTLE, WA 98105-9903 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEATTLE, WA 98105-9903 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	601 UNION ST., SUITE 2500 SEATTLE, WA 98101-4074 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEATTLE, WA 98105-9903 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ray M. Egan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 23, 2001 **(800) 544-2614**
RAY M. EGAN, ASST. SEC. **CMPLNC@SAFECO.COM**
Date Daytime Phone #

CR2F034 (10/00)

Attachment 1
017830525
A0535467

SAFECO INSURANCE COMPANY OF PENNSYLVANIA
(formerly: American Loyalty Insurance Company)

Michael S. McGavick	*	Chairman of the Board, President
William T. Lebo	*	Executive V.P.
Richard R. Berls		Sr. V.P.
Donald S. Chapman	*	Sr. V.P.
Peter E. Dunn		Sr. V.P.
Dale E. Lauer	*	Sr. V.P.
Rod A. Pierson	*	Sr. V.P., Secretary
James A. Schmidt		Sr. V.P.
Robert C. Taylor		Sr. V.P., Sr. Associate General Counsel
William E. Thomas		Sr. V.P.
Stephen C. Bauer		V.P., Treasurer
William J. Carron		V.P.
Stephen D. Collier		V.P., Asst. Secy.
John L. Elwell		V.P.
David W. Kraft		V.P., Controller, Asst. Secy.
H. Paul Lowber		V.P., Asst. Secy.
Darcy S. MacLaren		V.P.
Tim Mikolajewski		V.P.
Ronald L. Spaulding	*	V.P.
James C. Stiegler		V.P.
Michael Anderson		Asst. V.P., Asst. Secy., Asst. Controller
Richard M. Chyba		Asst. V.P.
David Mandt		Asst. V.P.
Patty J. McCollum		Asst. V.P.
Camille Minogue		Asst. V.P.
Scott W. Owen		Asst. V.P.
James G. Schmidt		Asst. V.P., Asst. Secy.
Ray M. Egan		Asst. Secy.
Neal A. Fuller		Asst. Secy.
Susan Tracey		Asst. Secy.
Bradford K. Young		Asst. Secy.
Gary A. Shane		Asst. Controller
Roger F. Harbin	*	
James W. Ruddy	*	

* = Denotes Director

SAFECO Insurance Company of Pennsylvania is 100% owned by SAFECO Corporation. The actual location of SAFECO Insurance Company of Pennsylvania is: c/o CT Corporation System, 1635 Market Street, Philadelphia PA 19103-2217. The mailing address is: Regulatory Compliance, SAFECO Plaza, Seattle, WA 98185-0001 and the email address is cmplnc@safeco.com.

DATED: February 14, 2001