

2001 UNIFORM BUSINESS REPORT (UBR)

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

03-21-2001 90044 029 ***150.00

DOCUMENT # F93000001574

1. Entity Name
SAFECO CREDIT COMPANY, INC.



Principal Place of Business: **SAFECO PLAZA SEATTLE WA 98185**
 Mailing Address: **REGULATORY COMPLIANCE SAFECO PLAZA SEATTLE WA 98185 US**

A0035472



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.
 City & State
 Zip Country

4. FEI Number **91-0840847**
 Applied For: Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND RD.
 PLANTATION FL 33324**

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	DC EIGSTI, ROGER H SAFECO PLAZA SEATTLE WA 98185 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MEANY, WILLIAM F SAFECO PLAZA SEATTLE WA 98185 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DICKEY, BOH SAFECO PLAZA SEATTLE WA 98185 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIERSON, RODNEY A SAFECO PLAZA SEATTLE WA 98185 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CVAS WOODS, DAVE A. SAFECO PLAZA SEATTLE WA 98185 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D MICHAEL R. CURRAN 10865 WILLOWS ROAD NE, SUITE E2 REDMOND, WA 98052-2554 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV BRUCE G. BAILEY 10865 WILLOWS ROAD NE, SUITE E2 REDMOND, WA 98052-2554 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV CHARLES C. SIMS 10865 WILLOWS ROAD NE, SUITE E2 REDMOND, WA 98052-2554 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VIS/T/D RODNEY A. PIERSON 4333 BROOKLYN AVENUE NE SEATTLE, WA 98105-9903 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/AS DAVE A. WOODS 10865 WILLOWS ROAD NE, SUITE E2 REDMOND, WA 98052-2554 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS STEPHEN D. COLLIER 4333 BROOKLYN AVENUE NE SEATTLE, WA 98105-9903 <input type="checkbox"/> Change <input checked="" 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: **STEPHEN D. COLLIER, ASST. SEC.**
 (800) 544-2614
 February 23, 2001 **CMP LNC@SAFECO.COM**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (10/00)

Attachment
DL# F930JW0152
AW35472

SAFECO CREDIT COMPANY, INC.

	*	Chairman of the Board
Michael R. Curran	*	President
Bruce G. Bailey		Sr. V.P.
Charles C. Sims		Sr. V.P.
Thomas Eylander		V.P.
Scott B. Heald		V.P.
Michael F. McBride		V.P., Asst. Secy., General Counsel
Brian E. McGarry		V.P.
Rod A. Pierson	*	V.P., Secretary, Treasurer
David Simpson		V.P.
David A. Woods		V.P., Controller, Asst. Secy.
James K. Bowles		Division V.P.
Stephen M. Isaacson		Division V.P.
Richard C. Manske		Division V.P.
Douglas Mehl		Division V.P.
Carl M. Boruck		Asst. V.P.
Pat Andrus		Division Asst. V.P.
Glen M. Anderson		Division Asst. V.P.
Douglas E. Evenson		Division Asst. V.P.
Derrick D. Johnson		Division Asst. V.P.
Ron Koehler		Division Asst. V.P.
Richard Kurz		Division Asst. V.P.
Scott Underberg		Division Asst. V.P.
Stephen D. Collier		Asst. Secy.
H. Paul Lowber		Asst. Secy.
Susan Tracey		Asst. Secy.
Therese Litton		Asst. Controller
Gwen Brickell		Corporate Counsel

* = Denotes Director

SAFECO Credit Company is 100% owned by SAFECO Corporation. The actual location of SAFECO Credit Company Inc. is: 10865 Willows Rd. NE, Ste. E-3, Redmond, WA 98052-2554. The mailing address of the corporate headquarters is: Regulatory Compliance, SAFECO Plaza, Seattle, WA 98185-0001 and the email address is cmplnc@safeco.com.

DATED: February 14, 2001