



101 S. King Street • Gloucester City, NJ 08030
Tel: (856) 742-3000
Fax: (856) 742-3291
www.holtlogistics.com

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November 6, 2007

U.S. Department of Labor
Employee Benefits Security Administration
Top Hat Plan Exemption
200 Constitution Avenue, N.W.
Suite N-1513
Washington, DD 20210

Dear Sir or Madam:

In order to comply with the requirements of the alternative reporting and disclosure method under ERISA, Parts 1, Title 1, as provided for an unfunded plan for a select group of management or highly compensated employees in the D.O.L. Regulation 2520.104-23 the following information is provided:

1. The name of the employer is:
Holt Logistics Corp.
2. The mailing address of the employer is:
101 S. King Street, Gloucester City, NJ 08030
3. The employer's federal identification number (EIN) is:
47-0853788
4. The number of plans and the number of participants in each plan is:
One plan covering one employee. The above named employer maintains this plan primarily for the purpose of providing deferred compensation benefits to a select group of management or highly compensated employee.

The employer will send a copy of all plan documents and agreements to the Secretary, upon request.

Respectfully submitted,

HOLT LOGISTICS CORP.

A handwritten signature in black ink, appearing to read "Michael Holt", is written over the printed name and title.

Michael Holt
Corporate Secretary

