

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001471

Entity Name: LIFEWATCH SERVICES INC.**Current Principal Place of Business:**1000 CEDAR HOLLOW RD
SUITE 102
MALVERN, PA 19355**Current Mailing Address:**1000 CEDAR HOLLOW RD
SUITE 102
MALVERN, PA 19355 US**FEI Number:** 52-2212112**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	PRESIDENT
Name	CAPPER, JOSEPH H.
Address	1000 CEDAR HOLLOW RD SUITE 102
City-State-Zip:	MALVERN PA 19355

Title	TREASURER
Name	GETZ, HEATHER C.
Address	1000 CEDAR HOLLOW RD SUITE 102
City-State-Zip:	MALVERN PA 19355

Title	DIRECTOR
Name	CAPPER, JOSEPH H
Address	1000 CEDAR HOLLOW RD SUITE 102
City-State-Zip:	MALVERN PA 19355

Title	DIRECTOR
Name	GETZ, HEATHER C.
Address	1000 CEDAR HOLLOW RD SUITE 102
City-State-Zip:	MALVERN PA 19355

Title	SECRETARY
Name	COWPER, CODY
Address	1000 CEDAR HOLLOW RD SUITE 102
City-State-Zip:	MALVERN PA 19355

Title	DIRECTOR
Name	COWPER, CODY
Address	1000 CEDAR HOLLOW RD SUITE 102
City-State-Zip:	MALVERN PA 19355

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: HEATHER C. GETZ**TREASURER****05/05/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date