

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003836

Entity Name: PENNONI ASSOCIATES INC.**Current Principal Place of Business:**1900 MARKET STREET
SUITE 300
PHILADELPHIA, PA 19103**Current Mailing Address:**1900 MARKET STREET
SUITE 300
PHILADELPHIA, PA 19103 US**FEI Number:** 23-1683429**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	VP
Name	SHAFFER, NELSON J
Address	608 BARFIELD DRIVE
City-State-Zip:	MARCO ISLAND FL 34145

Title	CFO
Name	MCPEAK, STACEY
Address	3 SURREY DRIVE
City-State-Zip:	NEWTOWN SQUARE PA 19073

Title	PRESIDENT/CEO
Name	DELIZZA, DAVID A
Address	729 WHITMAN DRIVE
City-State-Zip:	TURNERSVILLE NJ 08012

Title	VP
Name	PENNONI, ANDREW J
Address	906 TRUEPENNY ROAD
City-State-Zip:	MEDIA PA 19063

Title	VPS
Name	COOTE, PETER J
Address	128 WALTER DRIVE
City-State-Zip:	MEDIA PA 19063

Title	VP
Name	FREDERICK, BRUCE
Address	3209 SHADYSIDE LANE
City-State-Zip:	CHESAPEAKE VA 23321

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: PETER COOTE**CORPORATE
SECRETARY****01/02/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date