

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005043

Entity Name: SAP NATIONAL SECURITY SERVICES, INC.**Current Principal Place of Business:**3809 WEST CHESTER PIKE
SUITE 200
NEWTOWN SQUARE, PA 19073**Current Mailing Address:**3809 WEST CHESTER PIKE
SUITE 200
NEWTOWN SQUARE, PA 19073 US**FEI Number:** 56-2465474**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**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	DIRECTOR
Name	BUTLER, ROBERT H
Address	3809 WEST CHESTER PIKE SUITE 200
City-State-Zip:	NEWTOWN SQUARE PA 19073

Title	TREASURER, CFO
Name	ERLEY, DAVID
Address	3809 WEST CHESTER PIKE SUITE 200
City-State-Zip:	NEWTOWN SQUARE PA 19073

Title	CORPORATE SECRETARY
Name	ISOM, AMY DUFFY
Address	3809 WEST CHESTER PIKE SUITE 200
City-State-Zip:	NEWTOWN SQUARE PA 19073

Title	PRESIDENT, DIRECTOR
Name	TESTONI, MARK
Address	3809 WEST CHESTER PIKE SUITE 200
City-State-Zip:	NEWTOWN SQUARE PA 19073

Title	DIRECTOR
Name	TOWNSEND, FRANCES
Address	3809 WEST CHESTER PIKE SUITE 200
City-State-Zip:	NEWTOWN SQUARE PA 19073

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: AMY DUFFY ISOM**CORPORATE
SECRETARY****06/05/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date