

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 858071

Entity Name: NTT DATA FEDERAL SERVICES, INC.**Current Principal Place of Business:**8100 BOONE BOULEVARD
VIENNA, VA 22182**Current Mailing Address:**8100 BOONE BOULEVARD
VIENNA, VA 22182 US**FEI Number:** 52-0886546**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
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 METZGER, PETER
Address 8100 BOONE BOULEVARD
City-State-Zip: VIENNA VA 22182

Title DIRECTOR
Name COLLINS, ADMIRAL THOMAS
Address 8100 BOONE BOULEVARD
City-State-Zip: VIENNA VA 22182

Title DIRECTOR
Name CAVAIOLA, LAWRENCE DR.
Address 8100 BOONE BOULEVARD
City-State-Zip: VIENNA VA 22182

Title DIRECTOR/PRESIDENT
Name KAPUSTA, DAVID
Address 8100 BOONE BOULEVARD
City-State-Zip: VIENNA VA 22182

Title TREASURER
Name AROLD, CATHERINE
Address 8100 BOONE BOULEVARD
City-State-Zip: VIENNA VA 22182

Title SECRETARY
Name DEVLIN, JAMES
Address 8100 BOONE BOULEVARD
City-State-Zip: VIENNA VA 22182

Title FACILITY SECURITY OFFICER
Name MORMUR, ELMER
Address 8100 BOONE BOULEVARD
City-State-Zip: VIENNA VA 22182

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: CATHERINE AROLD

TREASURER

04/04/2014

Electronic Signature of Signing Officer/Director Detail

Date