# DOCUMENT# F13000004396 Entity Name: NTT DATA OPTIMAL NATIONAL SECURITY SERVICES, INC.

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

# Current Principal Place of Business:

7950 LEGACY DRIVE SUITE 900 PLANO, TX 75024

# **Current Mailing Address:**

7950 LEGACY DRIVE SUITE 900 PLANO, TX 75024 US

# FEI Number: 20-4188697

#### Name and Address of Current Registered Agent:

NRAI SERVICES, INC C/O 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

# **Officer/Director Detail :**

Sincer/Director Detail :				
Title	DIRECTOR	Title	DIRECTOR	
Name	CONWAY, TIMOTHY CHRISTOPHER	Name	CROXVILLE, WILLIAM DAVID	
Address	7950 LEGACY DRIVE SUITE 900	Address	7950 LEGACY DRIVE SUITE 900	
City-State-Zip:	PLANO TX 75024	City-State-Zip:	PLANO TX 75024	
Title	VP, TAX	Title	TREASURER	
Name	WAGNON, TROY	Name	VANCE, MEREDITH	
Address	7950 LEGACY DRIVE SUITE 900	Address	7950 LEGACY DRIVE SUITE 900	
City-State-Zip:	PLANO TX 75024	City-State-Zip:	PLANO TX 75024	
Title	SECRETARY	Title	CFO	
Name	DICK, JOHN M.	Name	CROXVILLE, WILLIAM DAVID	
Address	7950 LEGACY DRIVE SUITE 900	Address	7950 LEGACY DRIVE SUITE 900	
City-State-Zip:	PLANO TX 75024	City-State-Zip:	PLANO TX 75024	

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: TROY WAGNON

VICE PRESIDENT, TAX 05/13/2020

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

Date