

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 808915

Entity Name: NCR VOYIX CORPORATION**Current Principal Place of Business:**864 SPRING STREET NW
ATLANTA, GA 30308**Current Mailing Address:**864 SPRING STREET NW
ATLANTA, GA 30308 US**FEI Number:** 31-0387920**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 SECRETARY
Name STERRETT, KELLI
Address 864 SPRING STREET NW
City-State-Zip: ATLANTA GA 30308

Title TREASURER
Name PALMACCIO, JANA
Address 864 SPRING STREET NW
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR
Name HAUGEN, JANET
Address 864 SPRING STREET NW
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR
Name LARSEN, KIRK
Address 864 SPRING STREET NW
City-State-Zip: ATLANTA GA 30308

Title PRESIDENT, DIRECTOR
Name KELLY, JAMES G.
Address 864 SPRING STREET NW
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR
Name BURKE, CATHERINE L.
Address 864 SPRING STREET NW
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR
Name HENDERSON, IRV
Address 864 SPRING STREET NW
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR
Name MILLER, LAURA
Address 864 SPRING STREET NW
City-State-Zip: ATLANTA GA 30308

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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: KELLI STERRETT**SECRETARY****04/22/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SEN, LAURA
Address 864 SPRING STREET NW
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR
Name REDDY, KEVIN
Address 864 SPRING STREET NW
City-State-Zip: ATLANTA GA 30308

Title DIRECTOR
Name SLOAN, JEFFREY S.
Address 864 SPRING STREET NW
City-State-Zip: ATLANTA GA 30308