

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000000697

**Entity Name:** AT&T CONSULTING SOLUTIONS, INC.

**Current Principal Place of Business:**

3033 CHAIN BRIDGE RD  
OAKTON, VA 22124

**Current Mailing Address:**

3033 CHAIN BRIDGE RD  
OAKTON, VA 22124 US

**FEI Number:** 94-3341029

**Certificate of Status Desired:** No

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

CT 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           RUSCH, RUSSELL D.  
Address        3033 CHAIN BRIDGE RD  
City-State-Zip: OAKTON VA 22124

Title           DIRECTOR  
Name           GOLDFARB, CHARLES M.  
Address        3033 CHAIN BRIDGE RD  
City-State-Zip: OAKTON VA 22124

Title           ASST. TREASURER  
Name           JAMES, DANIEL V.  
Address        3033 CHAIN BRIDGE RD  
City-State-Zip: OAKTON VA 22124

Title           ASST. TREASURER  
Name           BAZAN, SHERRI L.  
Address        3033 CHAIN BRIDGE RD  
City-State-Zip: OAKTON VA 22124

Title           SECRETARY  
Name           LEE, J. MANNING  
Address        3033 CHAIN BRIDGE RD  
City-State-Zip: OAKTON VA 22124

Title           PRESIDENT  
Name           MINGO, DAVID F.  
Address        3033 CHAIN BRIDGE RD  
City-State-Zip: OAKTON VA 22124

*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:** DANIEL V. JAMES

**ASST. TREASURER**

**06/04/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date