

1.) CORPORATION NAME:

NTT DATA Federal Services, Inc.

DUE DATE: **11/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1424565**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8100 BOONE BLVD

CITY/ST/ZIP: VIENNA, VA 22182

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: DAVID KAPUSTA TITLE: PRESIDENT ADDRESS: 8100 BOONE BLVD CITY/ST/ZIP/CO: VIENNA, VA 22182</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: CATHERINE AROLD TITLE: TREASURER ADDRESS: 8100 BOONE BLVD CITY/ST/ZIP/CO: VIENNA, VA 22182</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JAMES E DEVLIN TITLE: SECRETARY ADDRESS: 8100 BOONE BLVD CITY/ST/ZIP/CO: VIENNA, VA 22182</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: ELMER MORMUR TITLE: SECURITYOFFICER ADDRESS: 8100 BOONE BLVD CITY/ST/ZIP/CO: VIENNA, VA 22182</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: DR. LAWRENCE CAVALOLA TITLE: DIRECTOR ADDRESS: 8100 BOONE BLVD CITY/ST/ZIP/CO: VIENNA, VA 22182</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: ADMIRAL THOMAS COLLINS TITLE: DIRECTOR ADDRESS: 8100 BOONE BLVD CITY/ST/ZIP/CO: VIENNA, VA 22182</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	PETER METZGER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8100 BOONE BLVD		
CITY/ST/ZIP/CO:	VIENNA, VA 22182		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ CATHERINE AROLD	CATHERINE AROLD, TREASURER	11/25/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.