2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01551

Entity Name: UNISYS CORPORATION

FILED Mar 27, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

UNISYS WAY

BLUE BELL, PA 19424 US

Current Mailing Address: New Mailing Address:

UNISYS WAY M/S E8-120

BLUE BELL, PA 19424 US

FEI Number: 38-0387840 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CT CORPORATION SYSTEM 1200 S. 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO () Delete Title: S (X) Change () Addition

City-St-Zip: BLUE BELL, PA 19424 City-St-Zip: BLUE BELL, PA 19424 US

Title: AS () Delete Title: T (X) Change () Addition Name: KEENE, SUSAN T Name: NANCY.

Address: UNISYS WAY E8-120 Address: UNISYS WAY E8-120 BLUE BELL PA 19424

City-St-Zip: BLUE BELL, PA 19424 City-St-Zip: BLUE BELL, PA 19424 US

Title: AT () Delete Title: A (X) Change () Addition Name: MILLER, NANCY L Name: NANCY,

Address: UNISYS WAY E8-120 Address: UNISYS WAY E8-120 BLUE BELL PA 19424

City-St-Zip: BLUE BELL, PA 19424 City-St-Zip: BLUE BELL, PA 19424 US

Title: SVPS () Delete Title: V (X) Change () Addition

Name: STRAUS SUNDHEIM, NANCY Name: JANET,
Address: UNISYS WAY E8-120 Address: UNISYS WAY E8-120 BLUE BELL PA 19424

City-St-Zip: BLUE BELL, PA 19424 City-St-Zip: BLUE BELL, PA 19424 US

Title: CFO () Delete Title: C (X) Change () Addition

 Name:
 HAUGEN, JANET B
 Name:
 COLEMAN, J.E

 Address:
 UNISYS WAY E8-120
 Address:
 UNISYS WAY

City-St-Zip: BLUE BELL, PA 19424 City-St-Zip: BLUE BELL, PA 19424 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NANCY L MILLER T 03/27/2009