2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000841

Entity Name: SUNGARD SYSTEMS INTERNATIONAL INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
560 LEXINGTON AVENUE, 11TH FLOOR NEW YORK, NY 10022					ON AVENUE K, NY 10017	US
Current Mailing Address:				New Mailing Address:		
601 WALNUT ST STE 1010 PHILADELPHIA, PA 19106			601 WALNUT ST STE 1010 PHILADELPHIA, PA 19106 US			
FEI Number: 23-2490902 FEI Number Applied For () FEI Num				nber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T 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.						
SIGNATUR						
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DC () MURATORE, MIG 600 LAUREL OA VOORHEES, NJ	K RD		Title: Name: Address: City-St-Zip:	D (X VICTORIA 680 E SWEDE: WAYNE, PA 19	
Title: Name: Address: City-St-Zip:	DVS () SIBBEY, VICTOI 680 E SWEDES WAYNE, PA 190	FORD RD		Title: Name: Address: City-St-Zip:	D (X MICHAEL 680 E SWEDE: WAYNE, PA 19	
Title: Name: Address: City-St-Zip:	DVS () RUANE, MICHAE 680 E SEWRDS WAYNE, PA 190	FORD RD		Title: Name: Address: City-St-Zip:	THOMAS 680 E SWEDE	
Title: Name: Address: City-St-Zip:	VS () BRUSH, LESLIE 680 E SEDESFO WAYNE, PA 190	: DRD RD		Title: Name: Address: City-St-Zip:	ROBERT 601 WALNUT S) Change ()Addition ST, STE 1010 A, PA 19106 US
Title: Name: Address: City-St-Zip:	VS (X) MULLANE, KARI 680 E SWEDES WAYNE, PA 190	FORD RD		Title: Name: Address: City-St-Zip:	()) Change ()Addition
Title: Name: Address: City-St-Zip:	C (X) HOGARTH, ROB 601 WALNUT ST PHILADEL PHIA	Г STE 1010		Title: Name: Address: City-St-Zip:) Change ()Addition

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: ROBERT HOGARTH C 04/27/2009