

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005303

FILED
Apr 08, 2008
Secretary of State

Entity Name: SUNGARD DATA SYSTEMS INC.

Current Principal Place of Business:

680 E. SWEDESFORD ROAD
WAYNE, PA 19087

New Principal Place of Business:

Current Mailing Address:

680 E. SWEDESFORD ROAD
WAYNE, PA 19087

New Mailing Address:

FEI Number: 51-0267091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: CHU, CHIN E
Address: 345 PARK AVENUE, 31ST FLOOR
City-St-Zip: NEW YORK, NY 10154

Title: CEO () Delete
Name: CONDE, CRISTOBAL
Address: 560 LEXINGTON AVENUE, 9TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: CONNAUGHTON, JOHN
Address: 111 HUNTINGTON AVENUE
City-St-Zip: BOSTON, MA 02199

Title: D () Delete
Name: GREENE, JAMES H JR.
Address: MENIO PARK, 2800 SAND HILL ROAD, SUITE 200
City-St-Zip: MENO PARK, CA 94025

Title: COB () Delete
Name: HUTCHINS, GLENN H
Address: 9 WEST 57TH STREET, 25TH FLOOR
City-St-Zip: NEW YORK, NY 10019

Title: D () Delete
Name: MARREN, JOHN
Address: 345 CALIFORNIA STREET, SUITE 3300
City-St-Zip: SAN FRANCISCO, CA 94104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN MARREN

D

04/08/2008

Electronic Signature of Signing Officer or Director

_____ Date