

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000001760 (6)

1. Corporation Name

SUNGARD RECOVERY SERVICES INC.



Principal Place of Business

1285 DRUMMERS LN.
SUITE 300
WAYNE PA 19087

Mailing Address

1285 DRUMMERS LN.
SUITE 300
WAYNE PA 19087

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

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29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

3. Date Incorporated or Qualified

04/11/1995

3a. Date of Last Report

4. FEI Number

23-2106195

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes

No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0902 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0904, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

DATE

1. TITLE

CEO
ADAMS, KENNETH R
1285 DRUMMERS LN.
WAYNE PA 19087

DELETE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

P
MULHOLLAND, MICHAEL F
1285 DRUMMERS LN.
WAYNE PA 19087

DELETE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

V
FLOUNDERS, WILLIAM J
1285 DRUMMERS LN.
WAYNE PA 19087

DELETE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

V
GAASCHE, THEODORE J
1285 DRUMMERS LN.
WAYNE PA 19087

DELETE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

D
GROSS, LAWRENCE A
1285 DRUMMERS LN.
WAYNE PA 19087

DELETE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

CEO

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William J. Flounders

1/19/96

(610) 341-8700

DATE

PHONE #

CR2E034 (12/95)