

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004280

FILED
May 07, 2007
Secretary of State

Entity Name: INFOR GLOBAL SOLUTIONS (ANN ARBOR), INC.

Current Principal Place of Business:

66 PERIMETER CENTER EAST
ATLANTA, GA 303461805

New Principal Place of Business:

13560 MORRIS ROAD
SUITE 4100
ALPHARETTA, GA 30004 US

Current Mailing Address:

C/O GEAC TAX DEPT.
66 PERIMETER CENTER EAST
ATLANTA, GA 30346 US

New Mailing Address:

13560 MORRIS ROAD
SUITE 4100
ALPHARETTA, GA 30004 US

FEI Number: 38-3295148

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WALTERS, KEN
Address: 66 PERIMETER CENTER EAST
City-St-Zip: ATLANTA, GA 303461805

Title: V () Delete
Name: FLEISCHER, RUSSELL
Address: 1000 WINDWARD CONCOURSE PKWY
City-St-Zip: ALPHARETTA, GA 30005

Title: T () Delete
Name: ANDERSON, KEITH
Address: 66 PERIMETER CENTER EAST
City-St-Zip: ATLANTA, GA 303461805

Title: S (X) Delete
Name: STEINER, BRAD
Address: 100 5TH AVE
City-St-Zip: WALTHAM, MA 02451

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDIR (X) Change () Addition
Name: GIANGIORDANO, GREGORY M
Address: 13560 MORRIS ROAD, SUITE 4100
City-St-Zip: ALPHARETTA, GA 30004

Title: SEC (X) Change () Addition
Name: STEINER, BRAD
Address: 550 COCHUTIAE ROAD
City-St-Zip: FRAMINGHAM, MA 01701

Title: TREA (X) Change () Addition
Name: HENRY, MARK
Address: 13560 MORRIS ROAD, SUITE 4100
City-St-Zip: ALPHARETTA, GA 30004

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: MARK HENRY

TREA

05/07/2007

Electronic Signature of Signing Officer or Director

Date