

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002623

FILED
Apr 03, 2009
Secretary of State

Entity Name: SUNGARD NETWORK SOLUTIONS INC.

Current Principal Place of Business:

401 NORTH BROAD STREET, 6TH FLOOR
PHILADELPHIA, PA 19108

New Principal Place of Business:

Current Mailing Address:

680 E. SWEDESFORD RD
WAYNE, PA 19087

New Mailing Address:

FEI Number: 23-2981034

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: CEO () Delete
Name: BERG, ERIC
Address: 680 E SWEDESFORD RD
City-St-Zip: WAYNE, PA 19087

Title: VPC () Delete
Name: MCKEEVER, EDWARD
Address: 680 E SWEDESFORD RD
City-St-Zip: WAYNE, PA 19087

Title: SVPO () Delete
Name: HENDERSON, JOHN J JR.
Address: 680 E SWEDESFORD RD
City-St-Zip: WAYNE, PA 19087

Title: VPT () Delete
Name: SLATTERY, SPENCER
Address: 401 N. BROAD STREET, 6TH FLOOR
City-St-Zip: PHILADELPHIA, PA 19108

Title: AC (X) Delete
Name: LOVELAND, PAUL D JR.
Address: 680 E SWEDESFORD RD
City-St-Zip: WAYNE, PA 19087

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TREA (X) Change () Addition
Name: MCKEEVER, EDWARD
Address: 680 E SWEDESFORD RD
City-St-Zip: WAYNE, PA 19087

Title: VP (X) Change () Addition
Name: SLATTERY, JAMES S
Address: 680 E SWEDESFORD RD
City-St-Zip: WAYNE, PA 19087

Title: AC (X) Change () Addition
Name: LANE, DOUGLAS A
Address: 680 E SWEDESFORD RD
City-St-Zip: WAYNE, PA 19087

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: DOUGLAS LANE

AC

04/03/2009

Electronic Signature of Signing Officer or Director

Date