

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006161

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: SUNGARD HIGHER EDUCATION ADVANCEMENT INC.

## Current Principal Place of Business:

1000 WINTER STREET  
SUITE 1200  
WALTHAM, MA 02451

## New Principal Place of Business:

## Current Mailing Address:

1000 WINTER STREET  
SUITE 1200  
WALTHAM, MA 02451

## New Mailing Address:

4 COUNTRY VIEW ROAD  
TAX DEPT.  
MALVERN, PA 19355

FEI Number: 52-2197045

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: DCEO ( ) Delete  
Name: MADOCKS, BRIAN J  
Address: 4 COUNTRY VIEW ROAD  
City-St-Zip: MALVERN, PA 19355

Title: DVST ( ) Delete  
Name: RUANE, MICHAEL J  
Address: 680 EAST SWEDES FORD ROAD  
City-St-Zip: WAYNE, PA 19087

Title: DVAS ( ) Delete  
Name: SILBEY, VICTORIA E  
Address: 680 EAST SWEDES FORD ROAD  
City-St-Zip: WAYNE, PA 19087

Title: SAVP ( ) Delete  
Name: BRUSH, LESLIE S  
Address: 680 EAST SWEDES FORD ROAD  
City-St-Zip: WAYNE, PA 19087

Title: VPO ( ) Delete  
Name: LOVE, SCOTT I  
Address: 1000 BUSINESS CENTER DRIVE  
City-St-Zip: LAKE MARY, FL 32746

Title: VPAS (X) Delete  
Name: MCCARTHY, MICHAEL F  
Address: 4 COUNTRY VIEW ROAD  
City-St-Zip: MALVERN, PA 19355

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change ( ) Addition  
Name: RON, LANG M  
Address: 680 E. SWEDES FORD ROAD  
City-St-Zip: WAYNE, PA 19380

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: VP (X) Change ( ) Addition  
Name: LOVE, SCOTT I  
Address: 1000 WINTER STREET  
City-St-Zip: WALTHAM, MA 02451

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: SCOTT I. LOVE

VP

03/23/2009

Electronic Signature of Signing Officer or Director

Date