2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 25, 2007
Secretary of State

DOCUMENT# M05000005238

Entity Name: SUNGARD BUSINESS SYSTEMS LLC

Current Principal Place of Business:

104 INVERNESS CENTER PLACE
BIRMINGHAM, AL 35242

New Principal Place of Business:

Current Mailing Address:

104 INVERNESS CENTER PLACE
BIRMINGHAM, AL 35242

New Mailing Address:

FEI Number: 59-1086117 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: BRONSTEIN, ANDREW P
Address: 680 E. SWEDESFORD ROAD
City-St-Zip: WAYNE, PA 19087

Title: MGR ( ) Delete
Name: GROSS, LAWRENCE A
Address: 680 E. SWEDESFORD ROAD
City-St-Zip: WAYNE, PA 19087

Title: MGR ( ) Delete
Name: RUANE, MICHAEL J
Address: 680 E. SWEDESFORD ROAD
City-St-Zip: WAYNE, PA 19087

ADDITIONS/CHANGES:

Title: S VP (X) Change ( ) Addition
Name: BLACK, ALAN
Address: 104 INVERNESS CENTER PLACE
City-St-Zip: BIRMINGHAM, AL 35242

Title: CFO (X) Change ( ) Addition
Name: FOLEY, MICHAEL L
Address: 104 INVERNESS CENTER PLACE
City-St-Zip: BIRMINGHAM, AL 35242

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL FOLEY CFO 07/25/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date