

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000005616

**FILED**  
**Feb 26, 2010**  
**Secretary of State**

**Entity Name:** SUNGARD FINANCIAL SYSTEMS LLC

**Current Principal Place of Business:**

601 SECOND AVENUE SOUTH  
HOPKINS, MN 55343

**New Principal Place of Business:**

**Current Mailing Address:**

601 SECOND AVENUE SOUTH  
HOPKINS, MN 55343

**New Mailing Address:**

**FEI Number:** 23-2585361

**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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** MCDUGALL, THOMAS S  
**Address:** 680 E SWANSFORD RD  
**City-St-Zip:** WAYNE, PA 19087

**Title:** MGRM  
**Name:** MULLANE, KAREN  
**Address:** 680 E SWEDES FORD ROAD  
**City-St-Zip:** WAYNE, PA 19087

**Title:** MGRM  
**Name:** SILBEY, VICTORIA  
**Address:** 680 E. SWEDES FORD ROAD  
**City-St-Zip:** WAYNE, PA 19087

**Title:** MGRM  
**Name:** MULLIN, WILLIAM  
**Address:** 601 WALNUT STREET, SUITE 1010  
**City-St-Zip:** PHILADELPHIA, PA 19106

I hereby 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:** WILLIAM MULLIN

MGRM

02/26/2010

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