

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000000635

Entity Name: SUNGARD IWORKS LLC

FILED  
Feb 19, 2009  
Secretary of State

## Current Principal Place of Business:

11560 GREAT OAKS WAY STE 200  
ALPHARETTA, GA 30022

## New Principal Place of Business:

11560 GREAT OAKS WAY  
SUITE 100  
ALPHARETTA, GA 30022

## Current Mailing Address:

11560 GREAT OAKS WAY STE 200  
ALPHARETTA, GA 30022

## New Mailing Address:

601 WALNUT STREET  
SUITE 1010  
PHILADELPHIA, PA 19106

FEI Number: 23-2814630

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CT 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 ( ) Delete  
Name: DAVIS, T RAY  
Address: 104 INVERNESS CENTER PLACE STE 325  
City-St-Zip: BIRMINGHAM, AL 35242

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

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

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MULLIN, WILLIAM  
Address: 601 WALNUT STREET, SUITE 1010  
City-St-Zip: PHILADELPHIA, PA 19106

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

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: WILLIAM MULLIN

MGRM

02/19/2009

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