

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000001040

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Entity Name:** WESTERN SUNGARD PUBLIC SECTOR USERS' GROUP ASSOCIATION, INC.

**Current Principal Place of Business:**

17605 MOCKINGBIRD HILL CIRCLE  
RIVERSIDE, CA 92504

**New Principal Place of Business:**

**Current Mailing Address:**

17605 MOCKINGBIRD HILL CIRCLE  
RIVERSIDE, CA 92504

**New Mailing Address:**

**FEI Number:** 91-2151337

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S 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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** KOLBOW, WILL  
**Address:** 10440 ASHFORD STREET  
**City-St-Zip:** RANCHO CUCAMONGA, CA 91730

**Title:** PP  
**Name:** GILBERT, PAM  
**Address:** P.O. BOX 1024  
**City-St-Zip:** BEND, OR 97709

**Title:** PE  
**Name:** JARMAN, DAVID C  
**Address:** 144 FERGUSON RD  
**City-St-Zip:** AUBURN, CA 95603

**Title:** SEC  
**Name:** WYNNNE, ANDREW  
**Address:** 1600 TRUXTUN AVENUE  
**City-St-Zip:** BAKERSFIELD, CA 93301

**Title:** TR  
**Name:** SLYTER, BROOKS  
**Address:** P.O. BOX 1024  
**City-St-Zip:** BEND, OR 97709

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** DAVID C. JARMAN

PE

04/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date