

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002610

FILED
Jan 05, 2011
Secretary of State

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

Current Principal Place of Business:

1471 HIGHLAND AVENUE
NEEDHAM, MA 02492

New Principal Place of Business:

Current Mailing Address:

1471 HIGHLAND AVENUE
NEEDHAM, MA 02492

New Mailing Address:

FEI Number: 06-1627608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEMS
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

OFFICERS AND DIRECTORS:

Title: S
Name: DIGIUSEPPE, CHERYL
Address: CITY OF PAWTUCKET;137 ROOSEVELT AVENUE
City-St-Zip: PAWTUCKET, RI 02860

Title: D
Name: BLENDT, ROBIN
Address: TOWN OF SMYRNA P.O. BOX 307
City-St-Zip: SMYRNA, DE 19977

Title: D
Name: BOUTILIER, DAN
Address: CITY OF PORTLAND 389 CONGRESS ST
City-St-Zip: PORTLAND, ME 04101

Title: D
Name: PONESS, EVELYN
Address: TOWN OF NEEDHAM 1471 HIGHLAND AVE
City-St-Zip: NEEDHAM, MA 02492

Title: P
Name: POTKALESKY, MARISAH
Address: PASSAIC VALLEY WATER1525 MAIN STREET
City-St-Zip: CLIFTON, NJ 07011

Title: D
Name: CORDOVA, RENE
Address: CITY OF NEW HAVEN 952 GRAND AVENUE
City-St-Zip: NEW HAVEN, CT 06510

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: EVELYN M PONESS

D

01/05/2011

Electronic Signature of Signing Officer or Director

Date