

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08081

FILED  
Apr 12, 2012  
Secretary of State

**Entity Name:** SUNGARD HIGHER EDUCATION INC.

**Current Principal Place of Business:**

GREAT VALLEY CORPORATE CENTER  
4 COUNTRY VIEW ROAD  
MALVERN, PA 19355

**New Principal Place of Business:**

**Current Mailing Address:**

GREAT VALLEY CORPORATE CENTER  
4 COUNTRY VIEW ROAD  
MALVERN, PA 19355

**New Mailing Address:**

**FEI Number:** 23-2303679

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**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: VP  
Name: MCCracken, Brent A  
Address: 4 COUNTRY VIEW ROAD  
City-St-Zip: MALVERN, PA 19355

Title: DCEO  
Name: SPEER, JOHN F III  
Address: 4375 FAIR LAKES COURT  
City-St-Zip: FAIRFAX, VA 22033

Title: DIR  
Name: BENNETT, JAMES D  
Address: 4 COUNTRY VIEW ROAD  
City-St-Zip: MALVERN, PA 19355

Title: CFO  
Name: BOYCE, KEVIN M  
Address: 4375 FAIR LAKES COURT  
City-St-Zip: FAIRFAX, VA 22033

Title: VPT  
Name: GEORGES, JOHN  
Address: 4375 FAIR LAKES COURT  
City-St-Zip: FAIRFAX, VA 22033

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

SIGNATURE: BRENT MCCracken

VP

04/12/2012

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

\_\_\_\_\_  
Date