2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001614

Entity Name: ADVENT SOFTWARE, INC.

Current Principal Place of Business:

600 TOWNSEND ST SUITE 500, TAX DEPT. SAN FRANCISCO, CA 94103

Current Mailing Address:

600 TOWNSEND ST SUITE 500 TAX DEPT. SAN FRANCISCO, CA 94103

FEI Number: 94-2901952

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 US FILED Apr 25, 2013 Secretary of State CC2728052421

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	CFO	Title	CEO
Name	COX, JAMES	Name	HESS, PETER
Address	600 TOWNSEND ST	Address	600 TOWNSEND ST
City-State-Zip:	SAN FRANCISCO CA 94103	City-State-Zip:	SAN FRANCISCO CA 94103
Title	SVP	Title	DIR
Name	BRENNAN, JOHN P.	Name	JOHN, SCULLY H
Address	600 TOWNSEND ST	Address	600 TOWNSEND ST
City-State-Zip:	SAN FRANCISCO CA 94103	City-State-Zip:	SAN FRANCISCO CA 94103
Title	DIRECTOR	Title	DIRECTOR
Name	DIMARCO, STEPHANIE G.	Name	HESS, PETER
Address	600 TOWNSEND ST SUITE 500	Address	600 TOWNSEND ST SUITE 500
City-State-Zip:	SAN FRANCISCO CA 94103	City-State-Zip:	SAN FRANCISCO CA 94103
Title	DIRECTOR	Title	DIRECTOR
Name	HIRJI, ASIFF S.	Name	KIRSNER, JAMES D
Address	600 TOWNSEND ST SUITE 500,	Address	600 TOWNSEND ST SUITE 500
City-State-Zip:	SAN FRANCISCO CA 94103	City-State-Zip:	SAN FRANCISCO CA 94103

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CFO

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: JAMES COX

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	MANFREDI, CHIRISTINE S	Name	TARKOFF, ROBERT M.
Address	600 TOWNSEND ST SUITE 500	Address	600 TOWNSEND ST SUITE 500
City-State-Zip:	SAN FRANCISCO CA 94103	City-State-Zip:	SAN FRANCISCO CA 94103
Title	DIRECTOR		

NameVAN AUKEN, WENDELL G.Address600 TOWNSEND ST

SUITE 500

City-State-Zip: SAN FRANCISCO CA 94103