

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003140

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: DISCOVER DSC CORPORATION

## Current Principal Place of Business:

11555 N. MERIDIAN STREET, SUITE 220  
CARMEL, IN 46032

## New Principal Place of Business:

## Current Mailing Address:

11555 N. MERIDIAN STREET, SUITE 220  
CARMEL, IN 46032

## New Mailing Address:

FEI Number: 20-1990165

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: FULLER, JOHN E  
Address: 11555 N. MERIDIAN STREET, SUITE 220  
City-St-Zip: CARMEL, IN 46032

Title: D ( ) Delete  
Name: SCHWARTZ, JOEL  
Address: 245 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10167

Title: T ( ) Delete  
Name: MCFARLAND, MARTIN  
Address: 11555 N. MERIDIAN STREET, SUITE 220  
City-St-Zip: CARMEL, IN 46032

Title: D ( ) Delete  
Name: HU, MEI  
Address: 245 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10167

Title: D ( ) Delete  
Name: ROBERTS, DAVID  
Address: 245 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10167

Title: D ( ) Delete  
Name: LAMANNA, JOE  
Address: 11555 N. MERIDIAN ST. SUITE 220  
City-St-Zip: CARMEL, IN 46032

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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 an address, with all other like empowered.

SIGNATURE: JOHN WICK

SECR

04/29/2008

Electronic Signature of Signing Officer or Director

Date