2008 FOR PROFIT CORPORATION ANNUAL REPORT

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DCCUMENT # F07000000766

1. Antity Name
DORCY INTERNATIONAL, INC.



FILED May 05, 2008 08:00 Al Secretary of State

Principal Place of Business

2700 PORT ROAD COLUMBUS, OH 43217 Mailing Address

2700 PORT ROAD COLUMBUS, OH 43217



04242008

No Chg-P

CR2E034 (11/05)

4. FEI Number 31-1146601 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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	ove named entity submits this statement for the partions of registered agent.	surpose of changing its registered offi	ce or r	egistered agent, or both	n, in the State of Florida. I am familiar with, and accept
SIGNATUR	BE	f applicable. (NOTE: Registered Agent	signaturi	e required when reinstating)	DATE
	ILE NOW!!! FEE IS \$150.00 May 1, 2008 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE	C				H00000949492

10.	OFFICERS AND DIRECTORS
TITLE	С
NAME	DAVIS, THEODORE
STREET ADDRESS	2700 PORT ROAD
CITY-ST-ZIP	COLUMBUS, OH 43217
TITLE	DP
NAME ,	BECKETT, THOMAS
STREET ADDRESS	2700 PORT ROAD
CITY-ST-ZIP	COLUMBUS, OH 43217
TITLE	DVP
NAME	CORNS, MARVIN
STREET ADDRESS	2700 PORT ROAD
CITY+ST-ZIP	COLUMBUS, OH 43217
TITLE	D
NAME	PRICE, AL
STREET ADDRESS	2700 PORT ROAD
CITY-ST-ZIP	COLUMBUS, OH 43217
TITLE	ST
NAME	VERHOEVEN, KATHY
STREET ADDRESS	2700 PORT ROAD
CITY-ST-ZIP	COLUMBUS, OH 43217
TITLE	D
NAME	KUNG, KEN
STREET ADDRESS	2700 PORT ROAD
CITY-ST-ZIP	COLUMBUS, OH 43217

U00000949492 06/03/08-80025-019 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report as suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all pitter like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2812008

Daytime Phone #