2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001689

Entity Name: WEATHER SERVICES INTERNATIONAL, INC.

FILED May 08, 2009 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
	EMAN ROAE R, MA 018101				
Current Mailing Address:			New Maili	ing Address:	
	EMAN ROAD R, MA 018101				
FEI Number:	04-2661930	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and	Address of New Registered Agent:	
1200 SOUT	ORATION SY TH PINE ISLA ON, FL 3332	ND ROAD			
	named entity of Florida.	submits this statement for the p	urpose of changing	its registered office or registered agent, or both,	
SIGNATUR					
		nic Signature of Registered Age	nt	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS	S AND DIREC	CTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FRIDDELL, III,	AMBLETON AVE	Title: Name: Address: City-St-Zip:	AS (X) Change () Addition KORNZWEIG, GABRIELA 100 UNIVERSAL CITY PLAZA UNIVERSAL CITY, CA 91608	
Title: Name: Address: City-St-Zip:	DC (ANSTROM, DE 150 W BRAME NORFOLK, VA	BLETON AVE	Title: Name: Address: City-St-Zip:	DT (X) Change () Addition MEHTA, SALIL 30 ROCKEFELLER PLAZA NEW YORK, NY 10112	
Title: Name: Address: City-St-Zip:	P (GILDERSLEEN 400 MINUTEM ANDOVER, MA	AN RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AS (GOETZ, SUSA 150 W BRAME NORFOLK, VA	BLETON AVE	Title: Name: Address: City-St-Zip:	DVP (X) Change () Addition CHAE, MICHAEL S 345 PARK AVENUE NEW YORK, NY 10154	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DVP () Change (X) Addition LORING, IAN 111 HUNTINGTON AVENUE BOSTON, MA 02110	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition KELLEY, BECK P 300 INTERSTATE NORTH PARKWAY, SE ATLANTA, GA 30339	

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: GABRIELA KORNZWEIG AS 05/08/2009