

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001689

Entity Name: WEATHER SERVICES INTERNATIONAL, INC.**Current Principal Place of Business:**400 MINUTEMAN ROAD
ANDOVER, MA 01810-1093**Current Mailing Address:**400 MINUTEMAN ROAD
ANDOVER, MA 01810-1093**FEI Number:** 04-2661930**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title AS
Name KORNZWEIG, GABRIELA
Address 100 UNIVERSAL CITY PLAZA
City-State-Zip: UNIVERSAL CITY CA 91608

Title D, T, S, VP
Name SWINDLER, EDWARD C
Address 75 ROCKEFELLER PLAZA
City-State-Zip: NEW YORK NY 10019

Title P
Name GILDERSLEEVE, MARK
Address 400 MINUTEMAN RD
City-State-Zip: ANDOVER MA 01810

Title D, VP, AS
Name WALLACE, PETER
Address 345 PARK AVENUE
City-State-Zip: NEW YORK NY 10154

Title D, VP, AS
Name LORING, IAN
Address 111 HUNTINGTON AVENUE
City-State-Zip: BOSTON MA 02110

Title VP, AS
Name ANGELL, KATHERINE M
Address 300 INTERSTATE NORTH PARKWAY
City-State-Zip: ATLANTA GA 30339

Title VP, AS
Name HAN, EDWARD
Address 111 HUNTINGTON AVENUE
City-State-Zip: BOSTON MA 02110

Title COO
Name WALTERS, CHRIS
Address 300 INTERSTATE NORTH PARKWAY
SE
City-State-Zip: ATLANTA GA 30339

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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: GABRIELA KORNZWEIG**ASSISTANT SECRETARY** 04/11/2014_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title VP, AS
Name HIGGS, WILLIAM
Address 300 INTERSTATE NORTH PARKWAY
City-State-Zip: ATLANTA GA 30339

Title SVP & GM/MEDIA
Name MENARD, JAMES L
Address 400 MINUTEMAN ROAD
City-State-Zip: ANDOVER MA 01810

Title VP/ENGINEERING
Name KLEIST, MICHAEL
Address 400 MINUTEMAN ROAD
City-State-Zip: ANDOVER MA 01810

Title VP/PRODUCT MANAGEMENT
Name DOW, BILL
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Title VP, S
Name CALLARD, GEORGE
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Title VP, AS
Name SAIDMAN, GARY
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Title VP & GM/AVIATION
Name MILLER, MARK D
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Title VP/GLOBAL FORECAST SERVICES
Name NEILLEY, PETER
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City-State-Zip: ANDOVER MA 01810

Title VP/SALES
Name WARD, STEVEN A
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Title CFO, T
Name KUIPERS, JEROEN PETER J
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