

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002535

Entity Name: WEATHER PREDICT INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

3200 ATLANTIC AVE SUITE 114
RALEIGH, NC 27604

New Principal Place of Business:

Current Mailing Address:

3200 ATLANTIC AVE SUITE 114
RALEIGH, NC 27604

New Mailing Address:

FEI Number: 59-3646902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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: PTD () Delete
Name: TILLMAN, CRAIG
Address: 3200 ATLANTIC AVE SUITE 114
City-St-Zip: RALEIGH, NC 27604

Title: SAT () Delete
Name: HODGES, STACEY
Address: 3200 ATLANTIC AVE SUITE 114
City-St-Zip: RALEIGH, NC 27604

Title: D () Delete
Name: RIKER, WILLIAM
Address: RENAISSANCE HOUSE, 8-12 EAST BROADWAY
City-St-Zip: HAMILTON, BERMUDA, -- HMGX

Title: D () Delete
Name: KHADILKAR, JAYANT
Address: 3200 ATLANTIC AVE SUITE 114
City-St-Zip: RALEIGH, NC 27604

Title: VPAT () Delete
Name: BACHIOCHI, DAVID
Address: 3200 ATLANTIC AVE SUITE 114
City-St-Zip: RALEIGH, NC 27604

Title: AS () Delete
Name: SELF, NANCY
Address: 5080 SPECTRUM DRIVE, SUITE 900 EAST
City-St-Zip: ADDISONT, TX 75001

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: NICHOLS, JOHN
Address: RENAISSANCE HOUSE, 8-12 EAST BROADWAY
City-St-Zip: HAMILTON, BERMUDA, -- HMGX

Title: D (X) Change () Addition
Name: COLE, JOSEPH
Address: 3200 ATLANTIC AVE SUITE 114
City-St-Zip: RALEIGH, NC 27604

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: NANCY SELF

AS

04/30/2008

Electronic Signature of Signing Officer or Director

Date