

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037575

Entity Name: WEATHER-OUT, INC.

FILED
Apr 07, 2004
Secretary of State

Current Principal Place of Business:

P.O. BOX 8157
HOBE SOUND, FL 33475

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8157
HOBE SOUND, FL 33475

New Mailing Address:

FEI Number: 90-0068723

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUYARD, MICHAEL R CPA
4726 OKEECHOBEE BLVD.
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

GUYARD, MICHAEL R CPA
1897 PALM BEACH LAKES BLVD
SUITE 219
WEST PALM BEACH, FL 33409 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: MICHAEL GUYARD

04/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REICH, PHILIP E
Address: 533 SE SOUTHWOOD TRAIL
City-St-Zip: STUART, FL 34997

Title: V () Delete
Name: REICH, MARIA
Address: 533 SE SOUTHWOOD TRAIL
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: PHILIP REICH

P

04/07/2004

Electronic Signature of Signing Officer or Director

Date