

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF MICHIGAN**

**Summons in a Civil Case**

Weather Underground,  
Incorporated,

Plaintiff(s),

v.

Case No. 2:09-cv-10756-MOB-VMM  
Hon. Marianne O Battani

Navigation Catalyst Systems,  
Incorporated, et al.,

Defendant(s).

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**Notice to Defendant Basic Fusion, Incorporated**

This summons is notification that you are being sued by the above named plaintiff(s). You are required to:

1. Serve upon the **plaintiff's attorney**:

Craig E. Schaefer  
810 Cottageview Drive  
Suite G-20  
Traverse City, MI  
49684

an answer to the complaint within twenty (20) days after receiving this summons, or  
take other actions that are permitted by the Federal Rules of Civil Procedure.

2. File with the court any answer that you serve on the parties to this action within the time limits specified.

Failure to answer or take other actions permitted by the Federal Rules of Civil Procedure may result in the issuance of a judgment by default against you for the relief demanded in the complaint.

**David J. Weaver, Clerk of Court**

By: s/ L. Behringer  
Deputy Clerk



Date of Issuance: February 27, 2009

### Summons and Complaint Return of Service

Case No. 2:09-cv-10756-MOB-VMM  
Hon. Marianne O Battani

A copy of the Summons and Complaint has been served upon the Defendant in the manner indicated below:

Name of Defendant Served: Basic Fusion, Incorporated

Date of Service: 3-9-09

### Method of Service

Personally served at this address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Left copies at defendant's usual place of abode with (name of person):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other (specify): certified return receipt U.S. mail

\_\_\_\_\_  
\_\_\_\_\_

Returned unexecuted (reason):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Service Fees:** Travel \$ \_\_\_\_\_ Service \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

### Declaration of Server

I declare under the penalty of perjury that the information contained in this Return of Service is true and correct.

Name of Server: Catherine D. Hrich

Signature of Server: Catherine D. Hrich

Date: 3-12-09

Server's Address: Traverse Legal PLC  
810 Cottageview Dr Unit G20  
Traverse City MI 49684

7006 0810 0006 1747 9376

U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)®

**OFFICIAL USE**

Postage	\$ 4.95	Postmark Here
Certified Fee	2.70	
Return Receipt Fee (Endorsement Required)	2.20	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 9.85	

TWU - BASIC FUS

Sent To BASIC FUSION INC  
 Street, Apt. No.; C/O PARACORP INCORPORATED  
 or PO Box No. 2804 GATEWAY OAKS DR #200  
 City, State, ZIP+4 SACRAMENTO CA 95833

PS Form 3800, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> <p>1. Article Addressed to:</p> <p>BASIC FUSION INC.            C/O PARACORP INCORPORATED            2804 GATEWAY OAKS DR #200            SACRAMENTO CA 95833</p>	<p>A. Signature <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number            (Transfer from service label)</p>	<p>7006 0810 0006 1747 9376</p>
<p>PS Form 3811, February 2004</p>	<p>Domestic Return Receipt 102595-02-M-1540</p>