REGISTRATION NUMBER

DVH 0335

DATE OF REGISTRATION/PUBLICATION

	3 19 07 Month Day Year				
	DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET. (Form Ď-VH/CON)				
	Please give the make and model of the vessel that embodies the design.  Crownline 255CCR Cuddycabin				
TLE					
<b>)</b> (a)	What is the type or style of the design for which registration is sought?  Fiberglass Cuddy cabin				
ESIGN(b)	Provide a brief general statement setting forth the salient features of the design.  Overall appearance including deck layout, hull configuration and shape				
Check here if is is a <b>single</b> esign. Check here if					
gistering ore than ne design. se Form -VH/CON or additional	If this design is derived from an earlier design, describe how that design has been revised, adapted, or rearranged.  N/A				
esigns.  DESIGNER(S)	Provide the name and address of the designer(s). The name of the employer may be given instead of the designer(s) if, (1) design was made within the regular scope of employment of the designer(s) and (2) the individual authorship of the design is diffior impossible to ascribe.  The please check here if those conditions are satisfied and you are providing the employer's name.  Name:  Name:  Address:  11884 Country Club Road  West Frankfort, IL 62896  West Frankfort, IL 62896				
OWNER, F NOT DESIGNERS)	If the owner is different from the designer(s) or employer named above, provide the name and address of the owner:  Name:  Address:				
(a) PRIORITY	Was an application for registration of this design identified in an application filed in a foreign country that extends to designs of owners who are citizens of the United States, or to persons filing applications in the United States, similar protection to that afforded in 17 USC chapter 13?  Yes No Serial No:				
OATE MADE	Was this design made public before the date of application? If yes, on what date?  August 15 2006  Day  Year  Application RECEIVED  NOV 2 8 2006  FUNDS RECEIVED				

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		□ Yes		OFFICE USE		
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DO NOT WE	Please provide the name and address of the person to whom correspondence regarding this application may be directed:					
	Name: Kevin J. Riem					
CONTACT PERSON	Address: 11884 Country Club Road	• .				
<b>M</b> OON	West Frankfort, IL 62896	Email address	kriem@crownline.	com		
	FAX number 618-932-6916	Daytime phone	;; ( <sup>618</sup> ) <u>937-6426</u>	)		
0	Give the name and account number if the registration fee is to be charged to a deposit account established in the Copyright Office:					
8	Name of Account:					
DEPOSIT ACCOUNT	Account number:	, F				
CERTIFICATION AND SWORN STATEMENTS	that willful false statements are punishable by fine or impri ments may jeopardize the validity of this application or any and belief:  (1) that the design has been fixed in a useful article; (2) that the design is original and was created by the design that those aspects of the design for which registratio (4) that the design has not previously been registered or (5) that the applicant is the person entitled to protection.  Complete if applicable:  The design has been made public with a design notice a Following is the exact form of the design notice:  Adhesive label w/"Protected Design Where on the useful article is the design notice located Port Aft Exterior  If the undersigned is not the applicant, he or she is proportional to the design notice of the design notice located Port Aft Exterior	resulting registration, hereby designer(s), or employer if applicant is sought are not protected by a behalf of the applicant or applicant to registration under chapter as prescribed by 17 USC §1306 m <sup>11</sup> , 2006, Crownline	able, named in the applicate a design patent; licant's predecessor in title ter 13 of title 17, United St.	r her knowledge ation; e; and tates Code.		
	Frint or type name  618-937-6426  Telephone number  Signature  Kevin J. Riem  Print or type name  618-932-6916  Fax number	Date Vice P1 Position	resident & General or title em@crownline.com	al Manager		
Copyrigh write the	nt Office fees are subject to change. For current fee: Copyright Office, or call (202) 707-3000.	s, check the Copyright Offi		pyright.gov.		
Certificate will be mailed in window envelope to this address:	Number/Street/Apt ▼	in Riem	YOU MUST: Complete all necessary spaces Sign your application in space 9 SEND ALL 3 BLEMENTS IN THE SAME PACKAGE: Application form One of the package of the	cor money order payabl		
	11884 Country Club Road City/State/Zip▼ West Frankfort, IL 62896		3. Design material  MAIL TO Dept: D-VH Vessel Hull Registration PO Box 71380 Washington, DC 20024-1380			
				Annual Control of the		

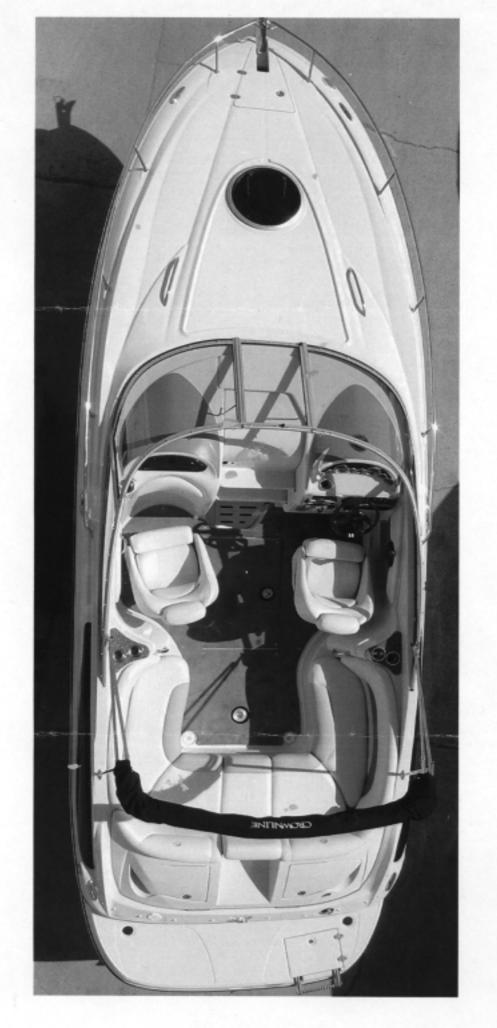
EXAMINED BY CHECKED BY

CORRESPONDENCE

17 USC \$1327. Penalty for false representation. "Whoever knowingly makes a false representation materially affecting the rights obtainable under this chapter for the purpose of obtaining registration of a design under this chapter shall pay a penalty of not less than \$500 and not more than \$1,000, and any rights or privileges that individual may have in the design under this chapter shall be forfeited."

FORM D-VH

FOR









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