

REGISTRATION NUMBER

DVH 0279

DATE OF REGISTRATION/PUBLICATION

Month 04 Day 03 Year 06

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET. (Form D-VH/CON)

Please give the make and model of the vessel that embodies the design.

Lakeland Boatworks, Inc. The Charlevoix

1
TITLE

What is the type or style of the design for which registration is sought?

Wood/epoxy moncouque laminated hull

2
DESIGN

Provide a brief general statement setting forth the salient features of the design.

arc bottom

Check here if this is a single design.
 Check here if registering more than one design. Use Form D-VH/CON for additional designs.

If this design is derived from an earlier design, describe how that design has been revised, adapted, or rearranged.

3
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) the design was made within the regular scope of employment of the designer(s) and (2) the individual authorship of the design is difficult or impossible to ascribe.

Please check here if those conditions are satisfied and you are providing the employer's name.

Name: _____

Name: Lakeland Boatworks, Inc.
900 E. Main St., Suite H

Address: _____

Address: Middleville, MI 49333

4
OWNER, IF NOT DESIGNER(S)

If the owner is different from the designer(s) or employer named above, provide the name and address of the owner:

Name: same as above

Address: _____

5
PRIORITY CLAIM

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 U.S.C. chapter 13?

Yes No

(b) If yes, identify the country and date of application:

Country: _____

Date of application: _____

Serial No: _____

6
DATE MADE PUBLIC

Was this design made public before the date of application? Yes No

If yes, on what date? August 10, 2005

Month Day Year

DO NOT WRITE HERE OFFICE USE ONLY

APPLICATION RECEIVED NOV 09 2005

DESIGN COPIES RECEIVED NOV 09 2005

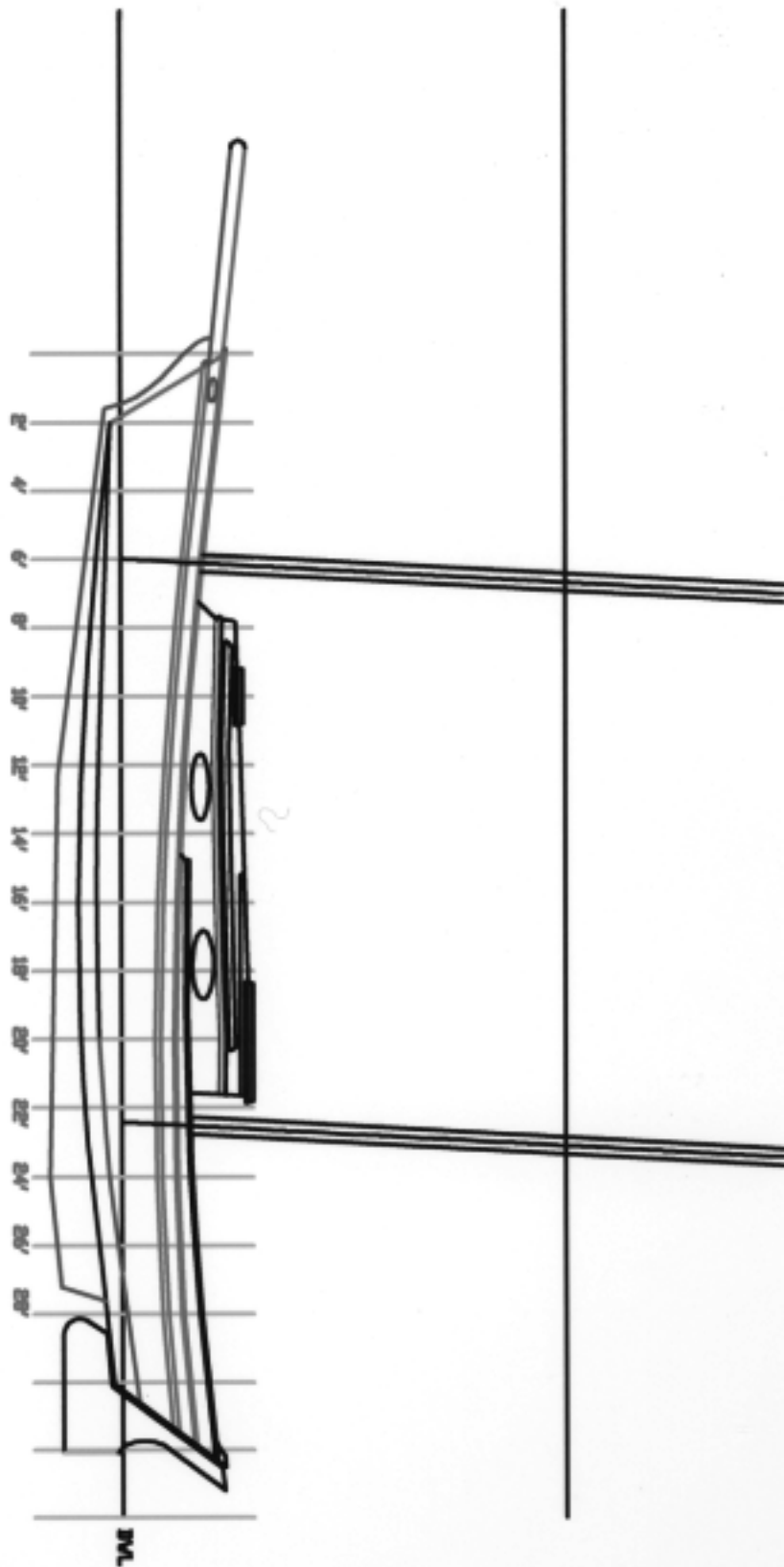
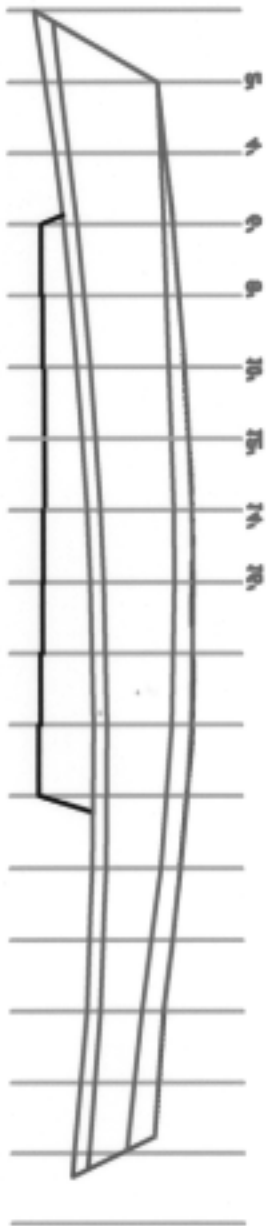
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MORE ON BACK

• Complete all applicable spaces (numbers 7-9) on the reverse side of this page.
• See detailed instructions. • Sign the form at section 9.

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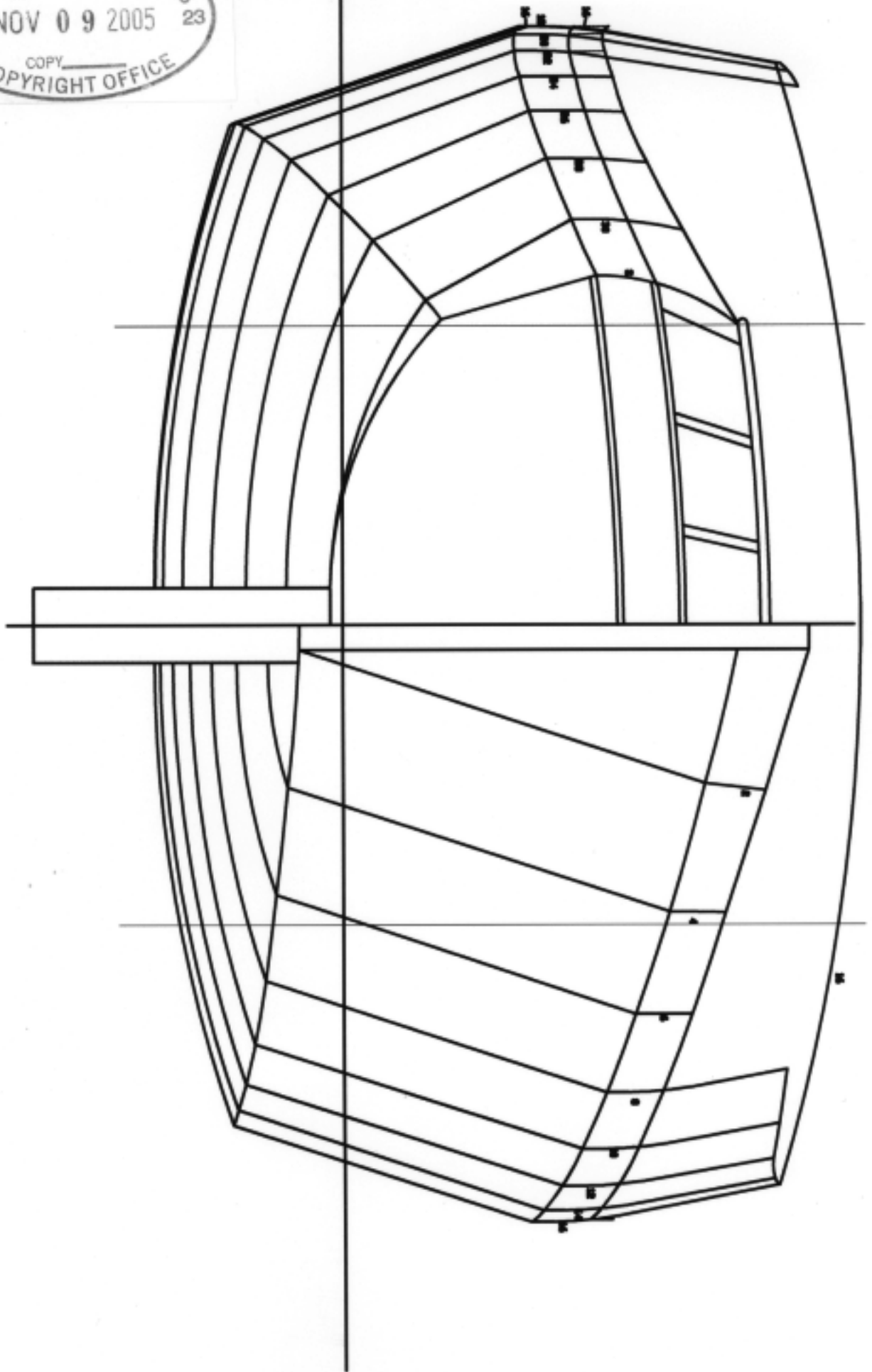




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