

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: Mozdev Community Organization

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 35 S. Portland Ave #3, Brooklyn, NY, 11217

Name of Agent Designated to Receive Notification of Claimed Infringement: David Boswell

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location): 35 S. Portland Ave #3, Brooklyn, NY, 11217

Telephone Number of Designated Agent: 718 625-8210

Facsimile Number of Designated Agent: —

Email Address of Designated Agent: david@mozdev.org

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 9/21/04

Typed or Printed Name and Title: David Boswell, President

**Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee
Made Payable to the Register of Copyrights.**



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