Interim Designation of Agent to Receive Notification of Claimed Infringement

Alternative Name(s) of Service provider is doing business): Got	Provider (including all names under which the servi
Address of Service Provider: 535	5 Madison Avenue, 30th Floor, New York, NY 10022
Name of Agent Designated to R Notification of Claimed Infring	Receive ement: Dr. Gary Curhan, President
Full Address of Designated Age or similar designation is not acceptable ex- location): 535 Madison Avenue, 30th Floor, N	ent to which Notification Should be Sent (a P.O. Box cept where it is the only address that can be used in the geographic New York, NY 10022
Telephone Number of Designate	ed Agent: 212-319-4100
Facsimile Number of Designate	d Agent: 212-319-4419
Email Address of Designated A	gent: admin@gothamprize.org
Signature of Officer or Represent	ative of the Designating Service Provider: Date:
Typed or Printed Name and Title:	Dr. Gary Curhan, President

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.



MAY 2 3 2007 COPYRIGHT OFFICE

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TO DAN HANTMAN	From GARY CURHAN
Co./Dept.	Co.
Phone #	Phone # 617-525-2683
Fax + 217 - 336 - 1232	Fax #