

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

**Full Legal Name of Service Provider:** Viztec Inc.

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

**Address of Service Provider:** 47 Stearns Street, Newton Center, MA 02159

**Name of Agent Designated to Receive Notification of Claimed Infringement:** David H. Freeman

**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):

14502 N. Dale Mabry, Suite 200  
Tampa, FL 33618

**Telephone Number of Designated Agent:** (813) 961-4466

**Facsimile Number of Designated Agent:** (813) 961-1942

**Email Address of Designated Agent:** dfreeman@viztec.com

**Signature of Agent** *[Signature]* **representative of the Designating Service Provider:**

**Date:** June 6, 2001

**Typed or Printed Name and Title:** David H. Freeman, Vice President

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.**

**RECEIVED**

Jun 25 2001

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