

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

**Full Legal Name of Service Provider:** WNY Internet Partners

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

**Address of Service Provider:** 790 Center St. P.O. Box 1301, Lewiston, NY 14092

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** Gena Peters

**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):  
790 Center St.  
Lewiston, NY 14092

**Telephone Number of Designated Agent:** 716-754-0048

**Facsimile Number of Designated Agent:** 716-754-0049

**Email Address of Designated Agent:** gpeters@wnyip.net

**Signature of Officer or Representative of the Designating Service Provider:**  
\_\_\_\_\_  
**Date:** 5-12-99

**Typed or Printed Name and Title:** Gena Peters, Partner

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

**RECEIVED**

MAY 19 1999

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