

Interim Designation of Agent to Receive Notification
of Claimed Infringement

Full Legal Name of Service Provider: OPPORTUNITY
EDUCATION FOUNDATION

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

Address of Service Provider: 2304 VALDIVIA WAY, BURLINGAME
CA 94010

Name of Agent Designated to Receive
Notification of Claimed Infringement: ALAN BARKLEY

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): 2304 VALDIVIA WAY, BURLINGAME, CA 94010

Telephone Number of Designated Agent: 650 302 4915

Facsimile Number of Designated Agent: 650 352 2198

Email Address of Designated Agent: alanbarkley@opportunityeducation
.059

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 10/24/08

Typed or Printed Name and Title: ALAN BARKLEY
EXECUTIVE DIRECTOR

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

SEARCHED 11 14 2008

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NOV 10 2008
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