## INTERIM DESIGNATION OF AGENT TO RECEIVE NOTIFICATION OF CLAIMED INFRINGEMENT

Note: This Interim Designation must be accompanied by a \$20 filing fee made payable to the <u>Register</u> of <u>Copyrights</u> . Please mail this form to: <u>Copyright GC/I&amp;R, P.O. Box 70400, Southwest Station</u> , <u>Washington</u> , D.C. 20024
Full Legal Name of Service Provider: A. Anderson Huber Cyber Campus
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):
Address of Service Provider: 404 Trojan Avenue APR 14 2003
/ 1 1/2 A D I m m
Name of Agent Designated to Receive Notification of Claimed Infringement:
A. Anderson Huber Cyber Compus
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)
404 Trojan Avenue
Sparta NC 28675
Telephone Number of Designated Agent: 336-372-73/3
Facsimile Number of Designated Agent: 336 - 372 - 56
Email Address of Designated Agent: 5 furgillit Ralleghay, Kiznc.us
Signature of Officer or Representative of the Designating Service Provider:
Date: 3/17/03
Typed/Printed Name and Title: Name: Travis Sturgil
Title: Cyber Campus Director 13
13280618.