

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

Full Legal Name of Service Provider: GREENICH ACADEMY, INC.

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

Address of Service Provider: 200 NORTH MAPLE AVENUE, GREENWICH CT
06830

Name of Agent Designated to Receive Notification of Claimed Infringement: GINA NICHOL, WEBMASTER

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):

Same as above

Telephone Number of Designated Agent: 203 625 8913

Facsimile Number of Designated Agent: 203 625 8963

Email Address of Designated Agent: gina_nichol@greenwichacademy.org

Signature of Officer or Representative of the Designating Service Provider: _____

Date: 12/12/2002

Typed or Printed Name and Title: GINA Nichol, Webmaster

**Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee
Made Payable to the Register of Copyrights.**

RECEIVED

DEC 23 2002

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