

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

Full Legal Name of Service Provider: _____
CORPORATION GUARANTEE AND TRUST COMPANY

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

Address of Service Provider: 3331 STREET ROAD STE 110 BENSLEM PA 19020

Name of Agent Designated to Receive Notification of Claimed Infringement: CORPORATION GUARANTEE AND TRUST COMPANY

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):
3331 STREET ROAD STE 110
BENSLEM PA 19020

Telephone Number of Designated Agent: 215-633-8144

Facsimile Number of Designated Agent: 215-633-8160

Email Address of Designated Agent: INFO@CGTCCO.COM

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 12/21/2007

Typed or Printed Name and Title: JOSEPH J COLLOPY VP

SCANNED 03-07/2008

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

Mail the form to:

Copyright GCI&R
P.O. Box 70400
Washington, DC 20024



RECEIVED

JAN 04 2008
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