

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

**Full Legal Name of Service Provider:** TeraNex Incorporated

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

**Address of Service Provider:** 7800 Southland Blvd., Orlando, FL 32809

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** David A. Simmons

**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):  
7800 Southland Blvd., Suite 250, Orlando, FL 32809

**Telephone Number of Designated Agent:** 407-517-1255

**Facsimile Number of Designated Agent:** 407-517-1101

**Email Address of Designated Agent:** david.simmons@teranex.com

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

**Date:** 15 SEP 2000

**Typed or Printed Name and Title:** DAVID A. SIMMONS  
Engineering Manager Media Services

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

**RECEIVED**

SEP 19 2000

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