

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

**Full Legal Name of Service Provider:** TRAILSOURCE.COM, Inc.

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

**Address of Service Provider:** P.O. Box 2795, Crested Butte, CO 81224 USA

**Name of Agent Designated to Receive Notification of Claimed Infringement:** James T. Walton

**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):  
P.O. Box 2795, Crested Butte, CO 81224 122 A ELK AVE.  
(no USPS delivery to physical addresses in Crested Butte) CRESTED BUTTE, CO 81224

**Telephone Number of Designated Agent:** (970) 765-8001

**Facsimile Number of Designated Agent:** \_\_\_\_\_

**Email Address of Designated Agent:** helpdesk@trailsource.com

**Signature of Officer or Representative of the Designating Service Provider:**  
[Redacted Signature] Date: November 1, 2010

**Typed or Printed Name and Title:** James T Walton, President

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

**\*Note: Current and adjusted fees are available on the Copyright website at  
[www.copyright.gov/docs/fees.html](http://www.copyright.gov/docs/fees.html)**

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