

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

**Full Legal Name of Service Provider:** DreamWorks Animation SKG, Inc.

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

**Address of Service Provider:** 1000 Flower Street, Glendale, CA 91201

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** Andrew Chang

**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):  
DreamWorks Animation, 1000 Flower St., Glendale, CA 91201, Attn: Designated Agent

**Telephone Number of Designated Agent:** (818) 695-5000

**Facsimile Number of Designated Agent:** (818) 695-4190

**Email Address of Designated Agent:** designated\_agent@dreamworks.com

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

*[Handwritten Signature]* Date: February 7, 2007

**Typed or Printed Name and Title:** Andrew Chang, Designated Agent

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

SCANNED 02 20-2007



RECEIVED

FEB 12 2007  
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