

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

Full Legal Name of Service Provider: The Trustees of the California
State University

**Alternative Name(s) of Service Provider (including all names under which the
service provider is doing business):** California State University,
San Bernardino

Address of Service Provider: 5500 University Parkway
San Bernardino, CA 92407

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Dr. William Aguilar

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):
5500 University Parkway, PL-2006; San Bernardino, CA 92407

Telephone Number of Designated Agent: (909)880-5099

Facsimile Number of Designated Agent: (909)880-7046

Email Address of Designated Agent: Copyright-agent@csusb.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing
Date, so that it may be Readily Located in the Directory Maintained by the Copyright
Office: California State University, San Bernardino, Filing Date August 14, 2000

Si _____ representative of the Designating Service Provider:
Date: 9-19/03

Typed or Printed Name and Title: Dr. William Aguilar
Vice President, Information Resources & Technology

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

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