

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

Full Legal Name of Service Provider: MOREnet (Missouri Research & Education Network)

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

Address of Service Provider: 3212 LeMone Industrial Blvd. Columbia, MO 65201

Name of Agent Designated to Receive Notification of Claimed Infringement: Laura Davidson, Ph.D.

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): 421 E. Hwy 124 Hallsville, MO 65255

Telephone Number of Designated Agent: 573-696-5512

Facsimile Number of Designated Agent: 573-696-3606

Email Address of Designated Agent: ldavidso@mail.hallsville.k12.mo.us

Signature of Designating Service Provider: _____
Date: 2/10/00

Typed or Printed Name and Title: Laura Davidson, Superintendent

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

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