

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

Full Legal Name of Service Provider: Rochester Institute of Technology (RIT)

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

Address of Service Provider: 2 Lomb Memorial Drive, Rochester, NY 14623

Name of Agent Designated to Receive Notification of Claimed Infringement: Donna Cullen, ITS Customer Support Services

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):

Donna Cullen, Information & Technology Services, 135 Lomb Memorial Drive
Rochester, NY 14623-5608

Telephone Number of Designated Agent: 585-475-4357 or 475-2970

Facsimile Number of Designated Agent: 585-475-7830

Email Address of Designated Agent: abuse@rit.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: _____

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

Date: 6/14/04

Typed or Printed Name and Title: Dr. Stanley D. McKenzie, Provost and Vice
President for Academic Affairs, Rochester Institute of 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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RECEIVED

JUN 25 2004

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