

Interim Designation of Agent to Receive Notification  
of Claimed Infringement

Full Legal Name of Service Provider: Acushnet Company

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

Address of Service Provider: 333 Bridge Street, Fairhaven, MA 02719

Name of Agent Designated to Receive  
Notification of Claimed Infringement: IP Administrator

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):  
333 Bridge Street, Fairhaven, MA 02719

Telephone Number of Designated Agent: 1-800-831-3996 x3292

Facsimile Number of Designated Agent: 508-979-3092

Email Address of Designated Agent: ip@acushnetgolf.com

Signature of Officer or Representative of the Designating Service Provider:  
\_\_\_\_\_  
Date: August 22, 2007

Typed or Printed Name and Title: Nancy H. Lutz  
Representative of Designating Service Provider

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



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SCANNED 07-17-2008

RECEIVED

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