

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

**Full Legal Name of Service Provider:** Gadsden State Community College

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

**Address of Service Provider:** 1001 George Wallace Drive, Gadsden, AL 35903

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Robert Gibson

**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):  
Meadows Library, 1001 George Wallace Drive  
Gadsden, AL 35903

**Telephone Number of Designated Agent:** 256-549-8412

**Facsimile Number of Designated Agent:** 256-549-8401

**Email Address of Designated Agent:** mgibson@gadsdenstate.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: Gadsden State Community College, 7/11/2003

Signature of Officer or Representative of the Designating Service Provider: \_\_\_\_\_  
Date: 8 July 2010

Typed or Printed Name and Title: James Jolly, Dean of Instructional Services

Note: This Amended Interim Designation Must be Accompanied by a Filing Fee\*  
Made Payable to the Register of Copyrights.  
\*Note: Current and adjusted fees are available on the Copyright website at  
[www.copyright.gov/docs/fees.html](http://www.copyright.gov/docs/fees.html)

Mail the form to:  
**Copyright GC/RRP**  
**P.O. Box 71537**  
**Washington, DC 20024**



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