

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

Full Legal Name of Service Provider: _____
REALTOR® Association of Franklin & Gulf Counties

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

Address of Service Provider: 78 11th Street, Apalachicola, FL. 32320

Name of Agent Designated to Receive Notification of Claimed Infringement: Gloria Salinard

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):
78 11th Street, Apalachicola, Fl. 32320

Telephone Number of Designated Agent: 850-653-3322

Facsimile Number of Designated Agent: 850-653-3710

Email Address of Designated Agent: gloria@rafgc.com

 Designating Service Provider:
Date: 6/29/16

Typed or Printed Name and Title: Gloria Salinard, Association Executive

**Note: This 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**

SCANNED
AUG 11 2016

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