

DATE OF REGISTRATION/PUBLICATION

REGISTRATION NUMBER

DVH 0402

07 28 2009 DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET. (Form D-VH/CON) Please give the make and model of the vessel that embodies the design. Phoenix 721 Pro XP TITLE What is the type or style of the design for which registration is sought? Fishing Boat Provide a brief general statement setting forth the salient features of the design.

The features relate to the configuration of the hull. DESIGN Check here if this is a **single** design. Check here if registering more than If this design is derived from an earlier design, describe how that design has been revised, adapted, or rearranged, one design. Use Form D-VH/CON for additional designs Provide the name and address of the designer(s). The name of the employer may be given instead of the designer(s) if, (1) the design was made within the regular scope of employment of the designer(s) and (2) the individual authorship of the design is difficult impossible to ascribe. or impossible to ascribe.

Please check here if those conditions are satisfied and you are providing the employer's name. DESIGNER(S) CJBBB, Inc. Name: Name: 210 Industrial Blvd. Address: Address: 37388 Tullahoma, TN If the owner is different from the designer(s) or employer named above, provide the name and address of the owner: OWNER, Address: IF NOT DESIGNER(S) If yes, identify the country and date of application: Was an application for registration of this design identified in an application filed in a foreign country that extends to Country: designs of owners who are citizens of the United States, or to persons filing applications in the United States, similar Date of application: PRIORITY protection to that afforded in 17 USC chapter 13? CLAIM Serial No: 🗆 Yes - 🚨 No APPLICATION RECEIVED Was this design made public before the date of application? ☐ Yes ☐ No DESIGN COPIES RECEIVED 2008 September If yes, on what date? Day DO NOT W DATE MADE PUBLIC DO NOT WRITE HERE MORE ON BACK Page 1 of

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| | | CORRESPONDENCE Yes | FOR COPYRIGHT OFFICE USE ONLY | | |
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| | Please provide the name and address of the person to | whom correspondence regarding this application may be | directed: | | |
| A. | Name: Paul W. Kruse, Esq. | | | | |
| CONTACT PERSON | Address: _ 511 Union Street, Suite 160 | 00 | | | |
| | Nashville, TN 37219 | Email address pkruse@bonelaw.com | m | | |
| | FAX number (615) 687-6993 | Daytime phone: (615) 238–6304 | | | |
| 8 | Give the name and account number if the registration fee is to be charged to a deposit account established in the Copyright Office Name of Account: | | | | |
| DEPOSIT ACCOUNT | Account number: | | | | |
| CERTIFICATION AND SWORN STATEMENTS | CLARATION: The undersigned, as the applicant or the applicant's duly appointed agent or representative, being hereby warned willful false statements are punishable by fine or imprisonment, or both, under 18 USC §1001, and that such willful false statements may jeopardize the validity of this application or any resulting registration, hereby declares to the best of his or her knowledge belief: (1) that the design has been fixed in a useful article; (2) that the design is original and was created by the designer(s), or employer if applicable, named in the application: (3) that those aspects of the design for which registration is sought are not protected by a design patent; (4) that the design has not previously been registered on behalf of the applicant or applicant's predecessor in title; and (5) that the applicant is the person entitled to protection and to registration under chapter 13 of title 17, United States Code. In the design has been made public with a design notice as prescribed by 17 USC §1306. Following is the exact form of the design notice: | | | | |
| S S | Signature Paul W. Kruse Print or type name (615) 238–6304 (615) 687–69 Talaphone number Fax number | operly authorized to execute this application on behalf of O | | | |
| Copyright write the | t Office fees are subject to change. For current fe Copyright Office, or call (202) 707-3000. | ees, check the Copyright Office website at www.co | pyright.gov, | | |
| O-Miller - I | Access - | YOU MUST: • Complete all necessary spaces | | | |
| Certificate will be | Name V | Sign your application in space 9 SED ALL 3 ELEMENTS | | | |
| mailed in window | Paul W. Kruse, Esq. Number/Street/Apt ▼ | IN THE SAME PACKAGE: 1, Application form | No. of Lots | | |
| envelope | 511 Union Street, Suite 1600 | Nonrefundable filing fee in check to Register of Copyrights | or money order payable | | |
| to this | JII onion before, baree 1000 | 3. Design material | - | | |

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address:

| City/State/Zip ▼ | Dept. D-VH |
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FORM D-VH











