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REGISTRATION NUMBER

DVH 0529

DATE OF	REGISTRA	TION/PUBI	ICATION

OCT 0 2 2012

	Month Day Year			
	DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET. (Form D-VH/CON)			
1 TITLE (a)	Please give the make and model of the vessel that embodies the design.  ELECTRIC KAYAK COMPANY HODELS:  12' SERBANO, 14' CAYENNE, 16' MIRASOL  What is the type or style of the design for which registration is sought?  FOUR PAINT STABILITED KAYAS HUML			
ESIGN (b)  Check here if is is a single esign.  Check here if gistering ore than ne design, se Form VH/CON r additional ssigns.	Provide a brief general statement setting forth the salient features of the design.  FIRESPONDED FORM HULL BADD DESK FARTURING MOUDED  INTRIGUED WITH SPONSONS FOR  FOUR POINT STARRUTH  If this design is derived from an earlier design, describe how that design has been revised, adapted, or rearranged.			
DESIGNER(S)	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 or impossible to ascribe.    Please check here if those conditions are satisfied and you are providing the employer's name.    Name:			
WNER, 'NOT ESKGNER(S)	If the owner is different from the designer(s) or employer named above, provide the name and address of the owner:  Name:  Address:			
(a) RIORITY LAIM	Was an application for registration of this design identified in an application filed in a foreign country that extends to designs of owners who are citizens of the United States, or to persons filing applications in the United States, similar protection to that afforded in 17 USC chapter 13?  Yes No Serial No:  If yes, identify the country and date of application:  Country:  Date of application:  Serial No:			
ATE MADE UBLIC	Was this design made public before the date of application? Yes No Pear APPLICATION RECEIVED 10/2-12-01-  If yes, on what date?    APPLICATION RECEIVED 10/2-12-01			

EXAMINED BY 77	FORM D-VH
CHECKED BY	,
CORRESPONDENCE	FOR
□Yes	COPYRIGHT OFFICE
	USE
	ONLV

	Please provide the name and address of the person to whom correspondence regarding this application may be directed:				
7	Name: Name: Delivy				
CONTACT PERSON	Address: 6108 SST AV CIR &				
LABON	FAX number	24203 Email address EKCOWATGZCJAFT & 4A  Daytime phone: (941) 232.8748			
8		stration fee is to be charged to a deposit account established in the Copyright Office:			
	Name of Account:	- Ojn			
DEPOSIT ACCOUNT	Account number:				
CERTIFICATION AND SWORN STATEMENTS	DECLARATION: The undersigned, as the applicant or the applicant's duly appointed agent or representative, being hereby warner that 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 and 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.  Complete if applicable:  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:  Where on the useful article is the design notice located?				
Copyright	Print or type name  Office fees are subject to change. For cu	horized to execute this application on behalf of the applicant.  9/28/2  Date  Position or title  Excountrices  Control fees, check the Copyright Office website at www.copyright.gov,			
	Copyright Office, or call (202) 707-3000.				
will be mailed in window envelope	Name ▼  // OBSET DELOR  Number/Street/Apt. ▼  // Apt. 55 ** Ay Cin.	YOU MUST:  Complete all necessary spaces Sign your application in space 9  SEND ALL 3 ELEMENTS IN THE SAME PACKAGE: 1. Application form 2. Nonrefundable filing fee in check or money order payable to Register of Copyrights			
o this address:	City/State/Zip V	3. Design material  MAIL TO: Dept. D-VH Vessel Hull Registration PO Box 71380  Washington, DC 20024-1380			









