

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

NO OTHER FILING
REC'D PER CO FILES

Full Legal Name of Service Provider: Blue Ridge Community College

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

Address of Service Provider: P. O. Box 80, One College Lane, Weyers Cave, VA 24486

Name of Agent Designated to Receive
Notification of Claimed Infringement: Cheryl O'Neil

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):

P. O. Box 80, One College Lane, Weyers Cave, VA 24486

Telephone Number of Designated Agent: (540) 453-2377

Facsimile Number of Designated Agent: (540) 234-8189

Email Address of Designated Agent: OneilC@brcc.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: _____

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 4/9/04

Typed or Printed Name and Title: Robert S. Baldygo
Vice President for Finance and Administration

Note: This Amended Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.

SCANNED 26 OCT 04

139755010



RECEIVED

APR 16 2004

COPYRIGHT OFFICE

NO OTHER FILING
REC'D PER CO FILES