

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

Full Legal Name of Service Provider: BookZone, Inc.

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

Address of Service Provider: PO Box 9642, Scottsdale AZ 85252-3642

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** George Hodgkins

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):

7545 E. Angus Dr.

Scottsdale AZ 85251-1609

Telephone Number of Designated Agent: 480-481-9737

Facsimile Number of Designated Agent: 480-481-0103

Email Address of Designated Agent: george@bookzone.com

Signature of Officer or Representative of the Designating Service Provider:

Date: 7/19/99

Typed or Printed Name and Title: George Hodgkins, VP Operations

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee
Made Payable to the Register of Copyrights.**

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RECEIVED

**JUL 26 1999
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