



Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Comfort Zone Camp, Inc.

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

Address of Service Provider: 4906 Cutshaw Ave., 2nd Floor, Richmond, VA 23230

Name of Agent Designated to Receive Notification of Claimed Infringement: Wendy Burtner-Owens

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):
Comfort Zone Camp, Inc., 4906 Cutshaw Ave., 2nd Floor, Richmond, VA 23230

Telephone Number of Designated Agent: 804-377-3430

Facsimile Number of Designated Agent: 804-377-3433

Email Address of Designated Agent: wendy@comfortzonecamp.org

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 12-29-09

Typed or Printed Name and Title: Wendy Burtner Owens
C.O.O.

SCANNED

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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

Mail the form to:
Copyright GC/I&R
P.O. Box 70400
Washington, DC 20024

