

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

Full Legal Name of Service Provider: Dire Needs, Inc.

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): Dire Needs, Inc.

Address of Service Provider: 1200 Alhambra Drive, Fort Myers, FL 33901

Name of Agent Designated to Receive Notification of Claimed Infringement: Joann and Matthew Ellis

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):
1200 Alhambra Drive, Fort Myers, FL, 33901

Telephone Number of Designated Agent: 239-462-3858

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: ellismj99@yahoo.com

Signature of Officer or Representative of the Designating Service Provider:

Date: 2-23-2009

Typed or Printed Name and Title: Managing Member, Joann Ellis
Managing Member, Matthew Ellis

SCANNED 03 27 - 2009

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.

Mail the form to:

Copyright GC/I&R
P.O. Box 70400
Washington, DC 20024



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