

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

Full Legal Name of Service Provider: Inmagic, Inc.

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

Address of Service Provider: 200 Unicorn Park Drive, Woburn MA 01801

Name of Agent Designated to Receive Notification of Claimed Infringement: Jeannine Flynn

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):

200 Unicorn Park Drive
Woburn MA 01801

Telephone Number of Designated Agent: 781-938-4444

Facsimile Number of Designated Agent: 781-938-4446

Email Address of Designated Agent: copyright@inmagic.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: June 23, 2003

Typed or Printed Name and Title: Phillip L. Green
President and CEO

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

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