

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

Full Legal Name of Service Provider: MapInfo Corporation

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

Address of Service Provider: One Global View, Troy, New York 12180

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Matthew Hoff

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):
c/o MapInfo Corporation; One Global View; Troy, New York 12180

Telephone Number of Designated Agent: 518-285-7424

Facsimile Number of Designated Agent: 518-285-7150

Email Address of Designated Agent: matt.hoff@mapinfo.com

Signature of Officer or Representative of the Designating Service Provider: _____

Date: June 18, 2003

Typed or Printed Name and Title: Matthew P. Hoff, Revenue Contracts Manager

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

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JUN 18 2003

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