

DATE OF REGISTRATION/PUBLICATION

REGISTRATION NUMBER

DVH0488

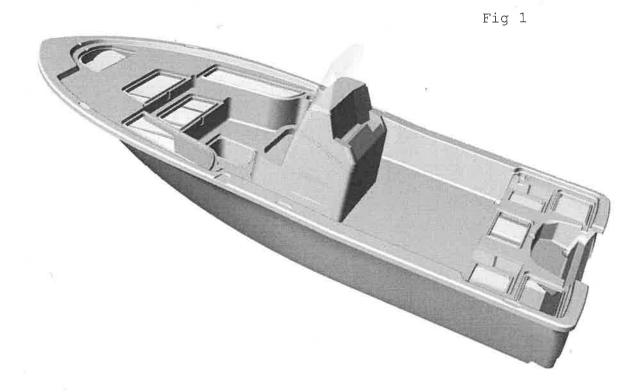
			9	28	2011			
	-	Month		Ову	Year			
MINISTER STATE OF THE STATE OF	DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE C	ONTINU	THON SI	HEET. (Form D	-VH/CON)			
	Please give the make and model of the vessel that embodies the design. Sea Fox Bay Fox 240XT							
TITLE					- The same of the State of the			
7 (a)	What is the type or style of the design for which registration is sought? Center-console bay boat							
DESIGN(b)	Provide a brief general statement setting forth the salient features of the design. Hull form and shape;							
Check here if this is a single design. Check here if	Deck configuration and layout; integrated planing pods in transom; reverse transom configuration;							
	progressive downward strake design on hull							
registering more than one design. Use Form D-VH/CON for additional designs.	If this design is derived from an earlier design, describe how that design has been	revised,	adapted	i, or rearrange	:d.			
3 DESIGNER(S)	Address: 2550 Hwy. 52 Address: Moncks Corner, SC 29461	ndividua	ame.	ship of the desi	gn is dirictift			
4	If the owner is different from the designer(s) or employer named above, provide the	name and	i address	s of the owner:				
OWNER, IF NOT DESIGNER(S)	Address:		*					
(a) PRIORITY CLAIM	Was an application for registration of this design identified in an application filed in a foreign country that extends to designs of owners who are citizens of the United States, or to persons filing applications in the United States, similar protection to that afforded in 17 USC chapter 13? Yes No Serial No:							
O DATE MADE PUBLIC	If yes, on what date? January January	CATION R	RECEIVE	ED 9/28	2011_			
M	ORE ON BACK - Complete all applicable spaces (numbers 7–9) on the reverse side of this page. - See detailed instructions. - Sign the form at section 9.			DO NO Page 1 o	T WRITE HERE pages			

			CORRESPONDENCE D Yes	FOR COPYRIGH OFFICE					
				USE					
DO NOT	WRITE ABO	VE THIS LINE. IF YOU NEED MORE SP	ACE, USE A SEPARATE CONTINUATION SHEE	ET. (Form D-VH/CON)					
	(2		erson to whom correspondence regarding this	s application may be directed:					
	Name:	David Cox, Esq.							
CONTACT PERSON	Address:	5 Exchange Street							
		Charleston, SC 29401	Email address dcox	@wcsr.com					
	FAX nun		Daytime phone: (
0	Give the	Give the name and account number if the registration fee is to be charged to a deposit account established in the Copyright Office:							
0	Name of	Name of Account:							
DEPOSIT ACCOUNT	Account :	number:							
CERTIFICATION AND SWORN STATEMENTS	that willfuments may and belief (1) tha (2) tha (3) tha (5) tha Complete The de Follow	DECLARATION: The undersigned, as the applicant or the applicant's duly appointed agent or representative, being hereby warned that willful false statements are punishable by fine or imprisonment, or both, under 18 USC § 1001, and that such willful false statements may jeopardize the validity of this application or any resulting registration, hereby declares to the best of his or her knowledge and belief: (1) that the design has been fixed in a useful article; (2) that the design is original and was created by the designer(s), or employer if applicable, named in the application; (3) that those aspects of the design for which registration is sought are not protected by a design patent; (4) that the design has not previously been registered on behalf of the applicant or applicant's predecessor in title; and (5) that the applicant is the person entitled to protection and to registration under chapter 13 of title 17, United States Code. Complete if applicable: The design has been made public with a design notice as prescribed by 17 USC §1306. Following is the exact form of the design notice:							
SW		Where on the useful article is the design notice located? If the undersigned is not the applicant, he or she is properly authorized to execute this application on behalf of the applicant. 9/20/20/1							
	Ryan Ba		VP of Pro	duct Development					
	Print or type n 843-761	-6090		n@seafoxboats.com					
Van -	Telephone nu								
Copyrigh write the	t Office fee Copyright	s are subject to change. For cur Office, or call (202) 707-3000.	rent fees, check the Copyright Office w	ebsite at www.copyright.gov,					
will be mailed in	Name ▼ Davi	d Cox, Esq.	• Comp • Sign) • Sign)	J MUST: lote all neossary spaces your application in space 9 ID ALLO ELEMENTS III SAME PACKAGE: III STAME PACKAGE: III STAME PACKAGE:					
anuntana	5 Exchange		2. Non to Ri 3. Desi	refundable filing fee in check or money order payable egister of Copyrights ign material					
	City/State/Zip ▼	Charleston, SC 29401	Dept. D Vessel P.O. Box	IBTO: -VVH -Hull Registration x 71380 giton, DC 20024-1380					

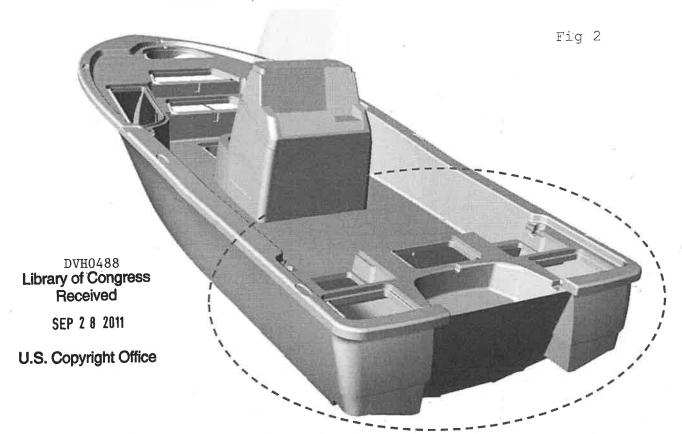
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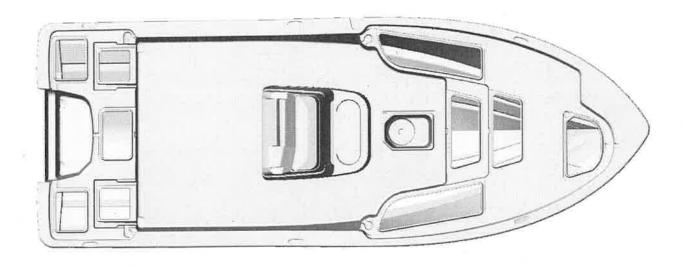
FORM D-VH

FOR

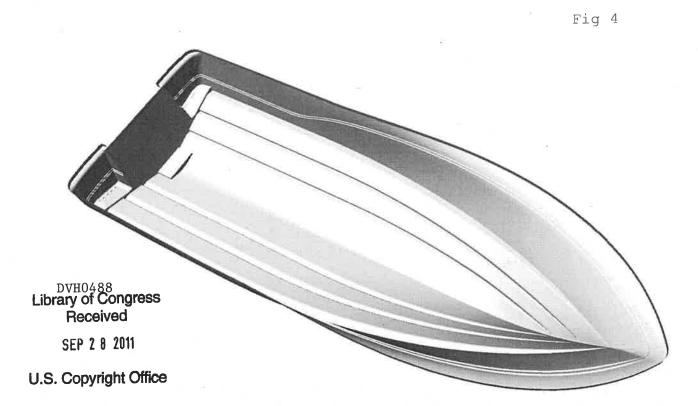


Seafox 240xt Bay Fish





Seafox 240xt Bay Fish



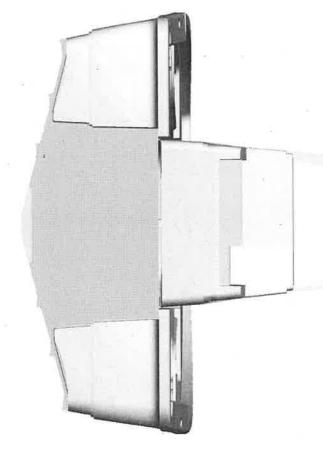


Fig 5

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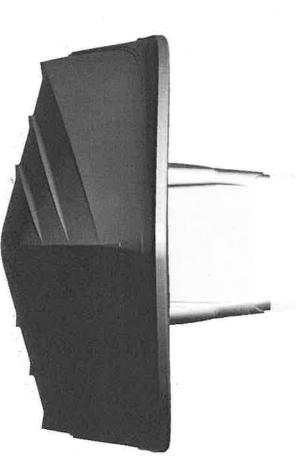
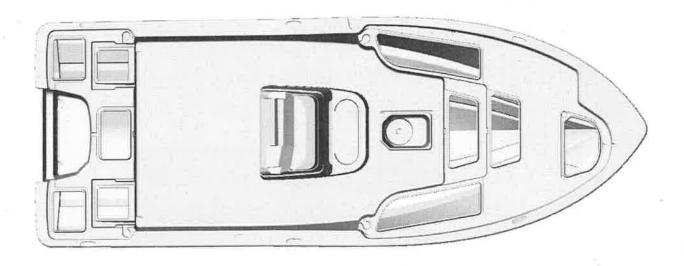
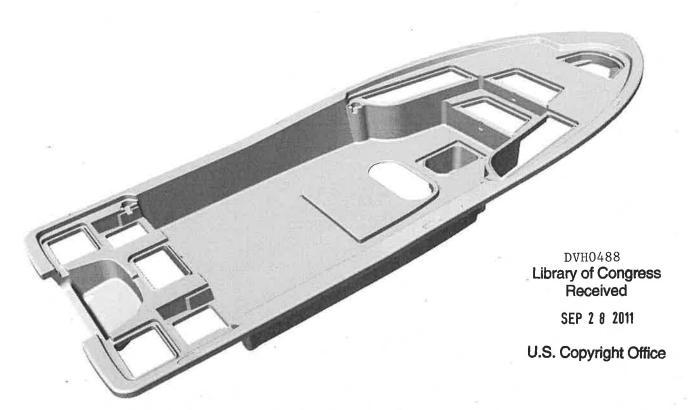


Fig 6

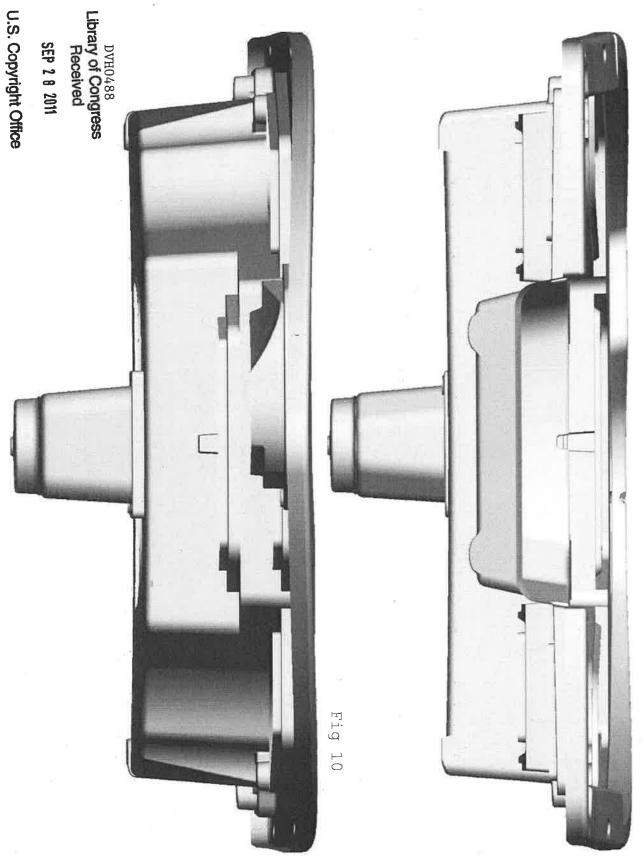


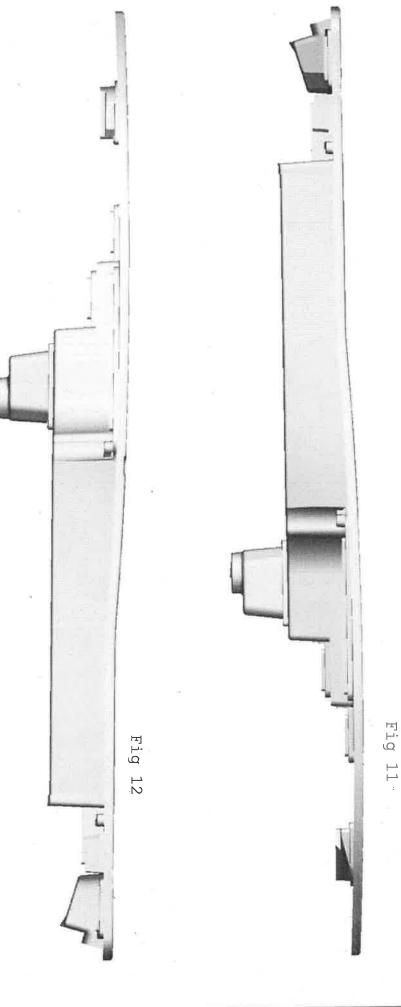
Seafox 240xt Bay Fish

Fig 8









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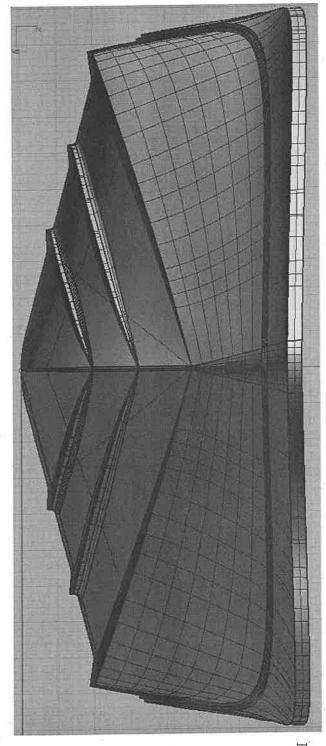


Fig 13

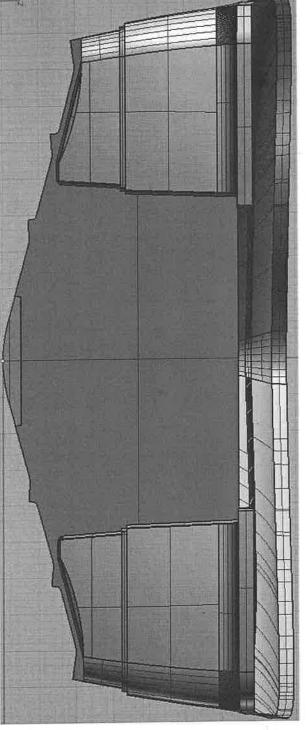
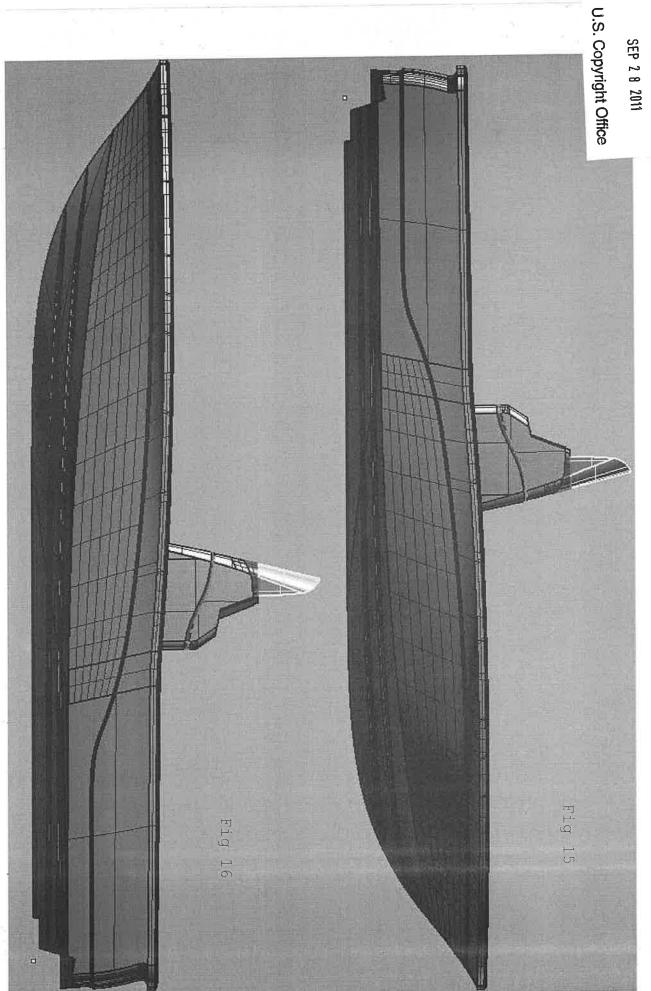


Fig 14

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Fig 18

