

CHANGE OF MAILING ADDRESS REQUEST FORM

To: Property owner of: _____

If your mailing address is no longer the same for the address listed above, please list:

Owner name(s): _____

Current mailing address: _____

Current phone number: _____ (optional)

Current email address: _____ (optional)

If you are no longer the owner of the property address listed above, please indicate the current owner, if known: _____

I confirm I am the owner of record for the property listed above and that the address change I provided is correct.

Owner Signature

Date

Please complete the information above and return it to our office at your earliest convenience so that we may ensure you receive timely notification of information pertaining to your property. You may also fax this form to us at:

McNeil Management Services, Inc.
P.O. Box 6235
Brandon, FL 33508-6004
Phone: (813) 571-7100
Fax: (813) 689-2747
Email: management@mcneilmsi.com

Thank you for taking the time to provide us with your current information so that we may serve you better. If you have any questions or need additional information, you may contact us at (813) 571-7100.