



**Common Interest Community Board**

**COMMON INTEREST COMMUNITY ASSOCIATION CONTACT PERSON/MANAGEMENT CHANGE FORM**

**ASSOCIATION INFORMATION**

- Enter the Association's Common Interest Community Board Registration No. 

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- Full Name of Association \_\_\_\_\_
- Website Address of Association (if available) \_\_\_\_\_

**CONTACT PERSON CHANGE**

- Name of Former Contact Person \_\_\_\_\_
- Name of New Contact Person \_\_\_\_\_
- New Contact Person's Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_
- Contact Numbers \_\_\_\_\_  
 \_\_\_\_\_ Primary Telephone \_\_\_\_\_ Alternate Telephone \_\_\_\_\_ Fax \_\_\_\_\_
- Contact Person's Email Address \_\_\_\_\_
- Effective Date of Change \_\_\_\_\_  
 The name and mailing address of the Contact Person will appear on the certificate of filing issued by the Board.

**ASSOCIATION MANAGEMENT CHANGE**

- Indicate how the community association is managed.
  - Self-managed (i.e., resident, volunteer, etc.)
  - Managed by an employee of the association
  - Under contract with a common interest community manager If under contract, provide the following information:  
 Name of Management Company \_\_\_\_\_  
 Common Interest Community Manager License Number 

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 Website Address of Management Company (if available) \_\_\_\_\_
- Effective Date of Change \_\_\_\_\_
- Signature of Representative \_\_\_\_\_  
 Printed Name of Representative \_\_\_\_\_  
 Representative's Title \_\_\_\_\_ Date \_\_\_\_\_

OFFICE USE ONLY	DATE	FEE <b>NO FEE</b>	TRANS CODE <b>8021</b>	ENTITY #	FILE #/LICENSE # <b>0550</b>	ISSUE DATE
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