

CHANGE OF ADDRESS FORM

Please complete and return to the offices we can update our records.
This information is used for Lake LeAnn Property Owners Association office only.

Account No. _____ Or Subdivision and Lot (s): _____

Member Name _____

Lake LeAnn Property Address _____

Do you receive mail at this address? _____yes _____no

Mailing Address (if different from above) _____

City _____ State _____ Zip _____

If your address changes in the winter please contact the office with your address change (517) 688-9704.

Phone No. _____ Alt. Phone No. _____

Email _____