Section 1: Identify your tax account. To ensure changes are made to the correct account, please complete the following information.

<table>
<thead>
<tr>
<th>Account Name (name of business or individual):</th>
<th>RT Account Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address:</td>
<td>Business Partner Number:</td>
</tr>
<tr>
<td>City/State/ZIP:</td>
<td>Tax Certificate Number:</td>
</tr>
<tr>
<td>Email Address:</td>
<td>Federal Identification Number:</td>
</tr>
<tr>
<td>Telephone Number: ( )</td>
<td>Fax Number: ( )</td>
</tr>
</tbody>
</table>

Section 2: Tax Type. This change applies to reemployment tax “RT” (formerly unemployment tax). However, if you wish to apply this change to your other tax accounts, please check the applicable boxes below.

- Corporate Income Tax
- Gross Receipts Tax
- Communications Services Tax
- Sales and Use Tax
- Motor Fuels Tax
- Documentary Stamp Tax
- Solid Waste Fees and Surcharge
- E-911 Tax

Section 3: Change your address. Select the address type and provide the new address information.

<table>
<thead>
<tr>
<th>Address Type: (choose one or more)</th>
<th>Business Location Address</th>
<th>RT Benefit/Claims Notice</th>
<th>RT Tax Rate Notice</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mailing Address</td>
<td></td>
<td>Employer's Quarterly Report</td>
</tr>
</tbody>
</table>

- Mailing Address:  
- City/State/ZIP:  
- Email Address:  
- Telephone Number: ( )  
- Extension:  
- Fax Number: ( )

Section 4: Change your account status. Request to inactivate, reactivate or cancel your account. Check the box next to the appropriate action and provide the date this action becomes effective.

<table>
<thead>
<tr>
<th>Action Requested (choose only one):</th>
<th>Inactivate – I have temporarily suspended business operations; I have no employees</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Reactivate – My business is now active; I am again paying wages</td>
</tr>
<tr>
<td></td>
<td>Cancel – I have no plans for future business activity; cancellations can not be reversed</td>
</tr>
</tbody>
</table>

- Effective date of action:  

Section 5: Corporate name change. I have changed my corporate name.

- Corporate name changed to:  
- Effective date:  

Section 6: Leasing Employees. I am leasing all or part of my employees.

- Leasing all of my employees  
  - Leasing Company’s RT Account Number:  
- Leasing part of my employees  
  - Leasing Company’s Federal Identification Number:  
- Date I began leasing employees:  
  - Leasing Company’s DBPR license number:  

Section 7: Sign and date

I certify that I am legally authorized to make these changes with respect to the account number shown above.

- Signature:  
- Date:  
- Title:  
- Telephone Number: ( )

Sign, date, and mail this Employer Account Change Form to:  
Florida Department of Revenue  
P.O. Box 6510  
Tallahassee FL 32314-6510  

Call 850-488-6800 for assistance.  
Information and forms are available on our website at: floridarevenue.com