

STATE OF NEW JERSEY - DIVISION OF REVENUE  
REQUEST FOR CHANGE OF REGISTRATION INFORMATION

Use this form to report any change in filing status, business activity, or to change your identification information such as identification number, business and/or trade name, business address, mailing address, etc. DO NOT use this form for a change in ownership or an incorporation of a business. A NJ-REG must be completed for these changes.

A. CURRENT INFORMATION (must be completed to process this form)

FEIN \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

B. CHANGES TO IDENTIFICATION INFORMATION

FEIN   -

Reason for change of FEIN \_\_\_\_\_

Business Name \_\_\_\_\_

(Corporations authorized by the NJ State Treasurer must file a corporate name change amendment, pg. 39)

Trade Name \_\_\_\_\_

Business Location: (Do not use P. O. Box for location address)

Mailing Name and Address:

Street \_\_\_\_\_

Name \_\_\_\_\_

City \_\_\_\_\_ State

Street \_\_\_\_\_

Zip Code      -

City \_\_\_\_\_ State

Zip Code      -

(Give 9-digit Zip)

(Give 9-digit Zip)

C. Telephone Numbers: Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Daytime ( ) \_\_\_\_\_ - \_\_\_\_\_

Evening ( ) \_\_\_\_\_ - \_\_\_\_\_

D. IF SEASONAL, CHECK MONTHS BUSINESS WILL BE OPEN:

JAN  FEB  MAR

APR  MAY  JUN

JUL  AUG  SEPT

OCT  NOV  DEC

E. CHANGES IN OWNERSHIP OR CORPORATE OFFICERS

NAME (Last Name, First, MI)	SOCIAL SECURITY NUMBER TITLE	HOME ADDRESS (Street, City, State, Zip)

F. CHANGES IN FILING STATUS AND BUSINESS ACTIVITY

Proprietorship/Partnership

Date

Business Sold or Discontinued \_\_\_\_\_

Business Incorporated \_\_\_\_\_

Owner Deceased \_\_\_\_\_

Name and Address of New Owner or Survivor of Merger \_\_\_\_\_

Date Ceased Collecting Sales Tax \_\_\_\_\_

Date Ceased Renting Motor Vehicles \_\_\_\_\_

Date Ceased Paying Wages \_\_\_\_\_

Date Ceased Sale of New Tires/Motor Vehicles \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

BUSINESS ENTITY AMENDMENT FILING

A. Business Name: \_\_\_\_\_

B. Statutory Authority for Amendment: \_\_\_\_\_ (See Instructions for List of Statutory Authorities)

C. ARTICLE \_\_\_\_\_ OF THE CERTIFICATE of the above referenced business is amended to read as follows. (If more space is necessary, use attachment)

Check one of the following indicating what type of business:

Incorporation     Formation     Registration     Authority     Limited Partnership

D. Other Provisions: (Optional) \_\_\_\_\_

E. Date Amendment was Adopted: \_\_\_\_\_

F. CERTIFICATION OF CONSENT/VOTING: (If required by one of the following laws cited, certify consent/voting)

N.J.S.A. 14A:9-1 et seq. or N.J.S.A 15A:9-1 et seq., Profit and Non-Profit Corps. Amendment by the Incorporators

Amendment was adopted by unanimous consent of the Incorporators.

N.J.S.A 14A:9-2(4) and 14A:9-4(3), Profit Corps., Amendment by the Shareholders

Amendment was adopted by the Directors and thereafter adopted by the shareholders.

Number of shares outstanding at the time the amendment was adopted \_\_\_\_\_, and total number of shares entitled to vote thereon \_\_\_\_\_. If applicable, list the designation and number of each class/series of shares entitled to vote:

List votes for and against amendment, and if applicable, show the vote by designation and number of each class/series of shares entitled to vote:

Number of Shares Voting for Amendment

Number of Shares Voting Against Amendment

\*\* If the amendment provides for the exchange, reclassification, or cancellation of issued shares, attach a statement indicating the manner in which same shall be effected.

N.J.S.A. 15A:9-4, Non-profit Corps., Amendment by Members or Trustees

The corporation has  does not have  members.

If the corporation has members, indicate the number entitled to vote \_\_\_\_\_, and how voting was accomplished:

At a meeting of the corporation. Indicate the number VOTING FOR \_\_\_\_\_ and VOTING AGAINST \_\_\_\_\_. If any class(es) of members may vote as a class, set forth the number of members in each class, the votes for and against by class, and the number present at the meeting:

Class                      Number of Members                      Voting for Amendment                      Voting Against Amendment

Adoption was by unanimous written consent without a meeting.

If the corporation does not have members, indicate the total number of Trustees \_\_\_\_\_, and how voting was accomplished:

At a meeting of the corporation. The number of Trustees VOTING FOR \_\_\_\_\_ and VOTING AGAINST \_\_\_\_\_.

Adoption was by unanimous written consent without a meeting.

G. AGENT/OFFICE CHANGE

New Registered Agent:

Registered Office: ( Must be a NJ street address)

Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

H. SIGNATURE(S) FOR THE PUBLIC RECORD

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

The above-signed certifies that the business entity has complied with all applicable NJ statutory filing requirements