

LAS PALMAS CONDO OWNER UPDATE:

CONDO UNIT NUMBER/S:

OWNER NAME/S:

MAILING ADDRESS/S:

CONDO PHONE NUMBER:

HOME PHONE NUMBER/S:

WORK PHONE NUMBER/S:

CELL PHONE NUMBER/S:

FAX NUMBER/S:

EMAIL ADDRESS/S:

MANAGEMENT COMPANY:

MGMT COMPANY PHONE NUMBER:

MORTGAGE COMPANY _____

MORTGAGE CO ADDRESS _____

DATE UNIT PURCHASED _____

(Be sure to include any area codes and/or extension numbers necessary)

Form revised 01/15

Return to:
LPCOA
P O Box 2863
Gulf Shores, AL 36547