

## **REGISTERED AGENT CONTACT INFORMATION FORM**

Please return completed form to <u>TLCLosAngeles@teloslegalcorp.com</u>

or Fax to:888-565-2901

Company Name:		
Principal Office Address:		
Phone:	Fax:	Fiscal Year:
Affiliated/Parent Company (if applic	able):	
States where this entity is appointing	TLC as Agent:	
Your name:	Phone:	
LEGAL MATTERS/SERVICE OF PROC	CESS TO:	
Legal Matters/Service of Process - If your	entity is served with legal process, Telc	os will forward it to you via
standard courier. Our standard courier wi	Il not deliver to a post office box-plea	use provide a physical address.
Company/Firm:		
Address:		
City, State, Zip:		
Contact Individual:		
Phone:	Fax:	
Email address:		
	Check if same as above	
Tax Notices - Information regarding entity		laws will be sent to this address.
Company/Firm:		
Address:		
City, State, Zip:		
Contact Individual:		
Phone:	Fax:	
Email address:		
RENEWAL INVOICES TO:	Check if same as abov	ve
Annual renewal invoices will be sent to th	is address.	
Company/Firm:		
Address:		
City, State, Zip:		
Contact Individual:		
Phone:	Fax:	
Email address:		
PLEASE NOTE: There are several states the	it require by statute that the Registere	ed Agent maintain in their
records the name and phone number of	a natural person or records maintena	ance person as the COMMUNICATIONS
<b>CONTACT</b> for the entity for law enforcem	ent purposes. We will consider the pe	erson designated on this form to be
the COMMUNICATIONS CONTACT for this	s purpose unless indicated below:	
Name:	Email:	
Address:		
City, State, Zip:		
Phone:	Fax:	