

Notification of Member Changes

Realtors® Association of St. Lucie, Inc
6666 South US#1, Suite 1, Port St. Lucie, FL 34952
Phone: 772-465-6080 Membership Fax: 772-464-5774



Please use this form if you are a **current member** of RASL making changes to your personal and office information, if you are leaving or transferring offices, or if you are reinstating your membership. Please Note: **Any changes made with RASL must also be made with Regional MLS.**

Date: _____ Name: _____

Please check one: I am a Designated Realtor® Realtor®

I am changing my personal information:

Previous Name: _____

New Name: _____

(Please attach copy of legal documents, new license or copy of DBPR 0800)

Previous Home/Mailing Address: _____

City: _____ State/Zip: _____

New Home/Mailing Address: _____

City: _____ State/Zip: _____

Add/Change an Email Address: _____

Add/Change a Home Fax Number: _____

Add/Change a Home Phone Number: _____

Add/Change a Cell Phone Number: _____

I am leaving this office:

Office ID Number: _____ Office Name: _____

Office Address: _____

I am transferring to this office:

Office ID number: _____ Office Name: _____

Office Address: _____

City: _____ State/Zip: _____

Phone: _____ Fax: _____

***Please include \$50 transfer fee and a copy of DBPR 2050 form with this change of office.**

I am reinstating my membership with my previous office

I am reinstating my membership and changing my office (also complete transfer office section)

Please include \$100 reinstatement fee and a copy of DBPR 2050 form with this change of status.

Member Name Printed: _____

Member Name Signed: _____