



Department of Regulatory and Economic Resources
Consumer and Neighborhood Protection Division
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Miami, FL 33175
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Community Association Registry Contact Update Form

Community Association Name: _____

Address: _____

Registration No. (CRxxxxxxx): _____

Primary Account Holder (*Main Online User*):

- Full Name: _____
- C/O (*If Applicable*): _____
- Email Address: _____
- Phone Number: _____
- Mailing Address: _____

Emergency Contact (*Alternate Contact Person*):

- Full Name: _____
- C/O (*If Applicable*): _____
- Email Address: _____
- Phone Number: _____
- Mailing Address: _____

Essential Reminders:

- It is the responsibility of the Association to update contact information on an annual basis and/or whenever changes occur throughout the year.
- Ensure that you are renewing under your current process number, as shown above. Generating a new process number for your renewal may result in duplicate registration fee payments, which would require a reimbursement process.
- Confirm that the association name you are registering is the full legal name of the association as shown on Sunbiz.
- **For more information:** <https://www.miamidade.gov/global/economy/consumer-protection/community-association-registry.page>

By submitting this form, I hereby certify that the information provided above is true.

Signature

Date