



**KATRINA S. SCARBOROUGH, CFA, CCF, MCF**  
**OSCEOLA COUNTY PROPERTY APPRAISER**  
**TANGIBLE PERSONAL PROPERTY**  
**BUSINESS ADDRESS/STATUS CHANGE FORM**

Account Number: \_\_\_\_\_ Business Change Date: \_\_\_\_\_

Reason for Change:  Mail and/or Business Address Change  Change Business Name  
 Closed Business  Business Sold  
 Other (please specify) \_\_\_\_\_

Current Business Name: \_\_\_\_\_

Current Business Address: \_\_\_\_\_  
Street City State Zip

Old Business Name: \_\_\_\_\_  
(If Applicable)

Old Business Address: \_\_\_\_\_  
(If Applicable) Street City State Zip

Current Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_  
Street City State Zip

If Sold, Previous Owner's Name and Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street City State Zip

What was done with the assets of the business? *(Please check all that apply)*

Sold all business assets to the new owner of the business  
 Kept all business assets in storage for future use  Kept all business assets for personal use  
 Other \_\_\_\_\_

Change Requested by:  Owner  Officer  Agent  Other \_\_\_\_\_

Are your Tangible Personal Property Taxes paid to date?  Yes  No  Not Sure

***Please be Advised: If you were in business as of January 1<sup>st</sup>,  
you will be responsible for tangible personal property assessment for that year.***

Requestor's Name (Please Sign) \_\_\_\_\_ Requestor's Name (Please Print) \_\_\_\_\_ Today's Date \_\_\_\_\_

Please mail to: Katrina S. Scarborough, CFA, CCF, MCF  
Osceola County Property Appraiser  
Attn: Tangible Personal Property  
2505 East Irlo Bronson Memorial Hwy  
Kissimmee, FL 34744-4909

Or fax to: (407) 742-5039