

C/O Watson Association Management, LLC

435 S Yonge St. Ste 3, Ormond Beach, FL 32174

<u>O</u>	<u>WNER INFORMATION SE</u>	<u>HEET</u>
In order to keep our records up	odated we are asking that you provi	de us with the current information.
OWNER(S) NAME:		
PROPERTY ADDRESS:		
TENANT NAME (if any): _		
Lease start date:	Lease end date:	
AWAY ADDRESS:		
CURRENT MAILING ADDRE	SSS:	□ AWAY ADDRESS
LOCAL PHONE NUMBER:	AWAY PHONE	NUMBER:
either calling us at 772-871-0004 or by §	going to the Watson Association Mana	want us to change your mailing address by agement web site at as Atrium One, click on Forward My Mail
Association, Inc. and Watson Association	orm, you are authorizing the Board of on Management to send you information ings, violations, updates and/or special	
We want to keep you better informed ab Oceans Atrium One Condo Association,		rding your investment as an owner in the
Yes ☐ I authorize Oceans Atrium One agendas, reports, violation letter	•	t to email me appropriate meeting notices,
Email Address:		
	(PRINT CLEARLY)	
Signature(s):		
Print Your Name(s):		

I do not want to receive emails from Oceans Atrium One and Watson Association Management.