

REGISTERED AGENT CONTACT INFORMATION FORM

Company Name:

Principal business office address *(required)*:

Telephone:

Fax:

Affiliated/Parent Company (if applicable)

State(s) where this entity is appointing NCR as Agent:

Your Reference Information
(OPTIONAL)

Client/Matter Number:

Name of Partner/Attorney in Charge

Fiscal Year (to ensure correct calculation of next annual/periodic report due date in [Entity Central](#)® for certain states): _____

LEGAL MATTERS TO:

Company/Firm:

Address:

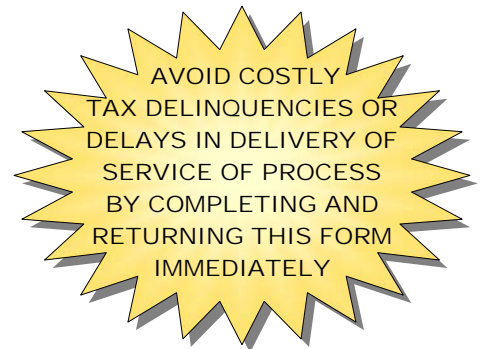
City, State, Zip:

***Contact Person's Name (see note):**

Phone:

Fax:

Email Address:



TAX NOTICES TO:

check if same as above

Company/Firm:

Address:

City, State, Zip:

Contact Person's Name

Phone:

Fax:

Email Address:

***IMPORTANT NOTE:** There are several states, including Delaware, that require by statute that the Registered Agent maintain in their records the name, address and phone number of a **natural person** (i.e., John Smith) or records maintenance person as the "Communications Contact" for the entity for law enforcement purposes. **WE WILL CONSIDER YOUR DESIGNATED CONTACT PERSON FOR LEGAL MATTERS TO BE THE COMPANY'S "COMMUNICATIONS CONTACT" FOR THIS PURPOSE unless you check the box below and indicate otherwise.**

Communications Contact is:

Person's Name:

Company:

Address:

City:

State:

Zip:

Phone:

Fax:

e-mail address:

RENEWAL INVOICES TO:

check if same as above

Company/Firm:

Address:

City, State, Zip:

Contact Person's Name

Phone:

Fax:

Email Address:

Your Name (required): _____ Phone: _____ Date: _____