

## CHANGE OF ADDRESS FORM

**Michael I. Goldberg, Receiver**  
c/o Jay Peak, Inc. et al.  
350 E. Las Olas Blvd., Suite 1600  
Ft. Lauderdale, Florida 33301-2229  
Toll Free: (800) 223-2234  
Facsimile: (954) 463-2224  
Email: [jaypeak@akerman.com](mailto:jaypeak@akerman.com)  
Website: [www.jaypeakreceivership.com](http://www.jaypeakreceivership.com)

**INSTRUCTIONS:** Please complete all sections of this form, sign and date it, and return it to the Receiver's office along with your driver's license or other government-issued picture identification. You can submit your completed form and ID to the Receiver's office in any one of the following formats:

- 1.) by email to [jaypeak@akerman.com](mailto:jaypeak@akerman.com);
- 2.) fax the form to (954) 463-2224; or
- 3.) mail the form to: Michael I. Goldberg, Receiver  
Jay Peak, Inc., et al.  
350 E. Las Olas Blvd., Suite 1600  
Ft. Lauderdale, Florida 33301-2229

Name: \_\_\_\_\_

Please check one:  I am an Investor – Project Name: \_\_\_\_\_  
 Vendor of Jay Peak, Inc.  
 Other

Old Address: \_\_\_\_\_ New Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone No: \_\_\_\_\_

Alternate Telephone No.: \_\_\_\_\_

Email: \_\_\_\_\_

I, the undersigned, hereby certify, under penalty of perjury, that all of the information provided in this Change of Address Form is true and correct.

Signed, under penalty of perjury this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title, if any: \_\_\_\_\_