

NOTARY PUBLIC CHANGE OF ADDRESS

**YOU MUST NOTIFY THE SECRETARY OF STATE OF ANY CHANGE OF ADDRESS WITHIN  
TEN (10) DAYS.**

PLEASE PRINT OR TYPE ALL INFORMATION.

\_\_\_\_\_  
NAME OF NOTARY PUBLIC

\_\_\_\_\_  
DATE COMMISSION EXPIRES

SOCIAL SECURITY OR NOTARY ID NUMBER \*

\_\_\_\_\_  
*\*The disclosure of your social security number is mandatory. It is solicited by the authority of Chapter 406 of the Government Code and will be used only to maintain the accuracy of the notary public records.*

OLD ADDRESS:

\_\_\_\_\_  
Street or P.O. Box

\_\_\_\_\_  
City

\_\_\_\_\_  
County

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

NEW ADDRESS:

\_\_\_\_\_  
Street or P.O. Box

\_\_\_\_\_  
City

\_\_\_\_\_  
County

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code