



DEPARTMENT OF FINANCIAL SERVICES
 Division of State Fire Marshal - Bureau of Fire Prevention - Boiler Safety Section
 200 East Gaines Street
 Tallahassee, FL 32399- 0361

Change of Owner/Location Contact Data

This request can only be completed by the new owner. Applicants must use this form to notify the Bureau of Fire Prevention / Boiler Safety Section of changes in their Owner/Location name or address. E-mail this completed form to Boiler.Safety@myfloridacfo.com. All fields are required to be completed or this request will be denied.

Please list all Jurisdiction Numbers associated with this request. This information can be found on our Public Portal Page. [Boiler Safety myfloridacfo.com](http://Boiler.Safety.myfloridacfo.com) . If Instruction are need on how to search for your boilers. After clicking on the Boiler Safety link, scroll halfway down the page and look right below Access to Public Poral for "Click here for instruction. After printing instruction go back and click on Access the Public Portal.

Please list Jurisdiction Numbers requesting updates for contacts:

CHANGE FROM	CHANGE TO – All billing & certificates will go to this address
Owner Business Name	Owner Business Name
LAKELAND SURGICAL+DIAGNOSTIC CENTER LLP	WATSON CLINIC ASC dba WATSON CLINIC SURGICAL CENTER
Address:	Address:
1315 N. Florida Ave	1315 N. FLORIDA AVE, LAKELAND, FL, 33805
Lakeland, Florida, 33805	Attn: Nicolette Williams
Phone:	Phone: 863-683-2268 x 1129
863.683.2268	
Email:	Email: Nwilliams2@watsonclinic.com

CHANGE FROM	CHANGE TO- The name of bldg. site. if I type the address in google maps
Location Business Name	Location Business Name
Address:	Address:
Phone:	Phone:
Email:	Email:

Name and Title of the person requesting this change:

Nicolette Williams
 Signature N.A. Williams

DIRECTOR
 Title