

STATE OF MICHIGAN PROBATE COURT LIVINGSTON COUNTY	CHANGE OF ADDRESS FORM	FILE NO.
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Court Address
 204 S. Highlander Way
 Suite 2, Howell, MI 48843

Court Telephone No.
 (517)-546-3750

1. In the matter of _____,
2. I am the (choose one) **PROTECTED PERSON** **FIDUCIARY** **INTERESTED PERSON**, in the above case.
3. My address has changed and my new mailing address is as follows:

 Name

 Street Address

 City, State, Zip Code

Date

Signature

4. Other: