

516033

Mail this postcard to people and businesses that send you mail

Please send mail to my new address beginning:

1 0 0 1 9 7  
Month Day Year

My Name (Last Name, First Name, Middle Initial)

Lakeside Groves Inc.

OLD Complete Street Address, PO Box, or Rural Route and RR Box No.

2866 Will-o-the-Wisp St

Apt/Suite No.

City or Post Office

Winter Park

State  
FL

ZIP Code or ZIP+4  
32792

NEW Complete Street Address, PO Box, or Rural Route No. and Box No.

180 Sandover PL

Apt/Suite No.

City or Post Office

Longwood

State  
FL

ZIP Code or ZIP+4  
32750

Account Number (If Applicable)

New Telephone No. (Optional)

(407) 767-6667

Signature

Terrell Palmer

Today's  
Date

0 9 1 5 9 7  
Month Day Year

PS Form 3576, February 1995

Recipient: Be sure to record the above new address.

KELLEY  
9/23