

IN THE CIRCUIT COURT OF THE FIFTH JUDICIAL CIRCUIT,  
IN AND FOR LAKE COUNTY, FLORIDA

CASE NO. \_\_\_\_\_

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Respondent

**CHILD SUPPORT**  
**INFORMATION CHANGE REQUEST**

**PREVIOUS INFORMATION:**

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

Address: \_\_\_\_\_

\_\_\_\_\_

**NEW INFORMATION:**

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

New Address:s \_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

**ADDITIONAL INFORMATION:**

Person Making Payments: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Please mail or deliver form to:  
Gary J. Cooney, Clerk of the Circuit Court and Comptroller  
Attn: Child Support Division  
P.O. Box 7800  
550 West Main Street  
Tavares, Florida 32778-7800  
Or Fax to (352) 742-4316