Form **8822** (Rev. May 1995)
Department of the Treasury
Internal Revenue Service

Change of Address

▶ Please type or print.
▶ See instructions on back. ▶ Do not attach this form to your return.

OMB No. 1545-1165

Part I Complete This Part To Change Your Home Mailing Address

Check ALL boxes this change affects:

1 ☐ Individual income tax returns (Forms 1040, 1040A, 1040EZ, 1040NR, etc.)
▶ If your last return was a joint return and you are now establishing a residence separate from the spouse with whom you filed that return, check here ▶ ☐
2 ☐ Employment tax returns for household employers (Forms 942, 940, 940-EZ, etc.)
▶ Enter your employer identification number here ▶
3 ☐ Gift, estate, or generation-skipping transfer tax returns (Forms 706, 709, etc.)
▶ For Forms 706 and 706-NA, enter the decedent's name and social security number below.
▶ Decedent's name ▶ Social security number

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4a Your name (first name, initial, and last name)	4b Your social security number
5a Spouse's name (first name, initial, and last name)	5b Spouse's social security number

6 Prior name(s). See instructions

7a Old address (no., street, city or town, state, and ZIP code). If P.O. box or foreign address, see instructions — Apt. no.

7b Spouse's old address, if different from line 7a (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions — Apt. no.

8 New address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions — Apt. no.

Part II Complete This Part To Change Your Business Mailing Address or Business Location

Check ALL boxes this change affects:

9 ☒ Employment, excise, and other business returns (Forms 720, 941, 990, 1041, 1065, 1120, etc.)
10 ☐ Employee plan returns (Forms 5500, 5500 C/R, and 5500EZ). See instructions.
11 ☒ Business location

12a Business name	12b Employer identification number
MARKHAM COMPUTER CORPORATION	65-0253995

13 Old address (no., street, city or town, state, and ZIP code). If P.O. box or foreign address, see instructions — Room or suite no.
ONE SOUTH OCEAN BLVD SUITE 3[illegible]
BOCA RATON, FL 33432

14 New address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions — Room or suite no.
2255 GLADES ROAD STE 324 AT[illegible]RIUM
BOCA RATON, FL 33431

15 New business location (no., street, city or town, state, and ZIP code). If a foreign address, see instructions — Room or suite no.
2255 GLADES ROAD SUITE 324 AT[illegible]RIUM
BOCA RATON, FL 33431

Part III Signature

Daytime telephone number of person to contact (optional) ▶ 561-394-3994

Please Sign Here

Your signature — Date: Aug 18/96
If Part II completed, signature of owner, officer, or representative — Date

If joint return, spouse's signature — Date
Title: Treasurer

For Privacy Act and Paper Reduction Act Notice, see back of form. Form **8822** (Rev. 5-95)