

**State of Florida**  
**Department of Business and Professional Regulation**  
**Florida Real Estate Commission**  
**Change of Status for Sales Associates and Broker Sales Associates**  
**Form # DBPR RE 11**

Check the box for the relevant transaction in Section I and complete the applicable additional section(s) only. Leave the sections that are not relevant to your desired transaction blank. If you have any questions or need assistance in completing this form, please contact the Department of Business and Professional Regulation, Customer Contact Center, at 850.487.1395.

**For additional information see instructions at the end of this form.**

**Section I – Transaction Types**

TRANSACTION TYPES	
<input checked="" type="checkbox"/> Add Employee [3020] <input type="checkbox"/> Terminate Employee [4020]	<input type="checkbox"/> Become Inactive [4020] <input type="checkbox"/> Change Employer [9007]

**Section II – Associate Information**

ASSOCIATE INFORMATION			
License Number:			
Last/Surname	First	Middle	Suffix
Primary Phone Number	Primary E-Mail Address		

**Section III – Broker or Company Information**

COMPANY INFORMATION			
Last/Surname (Qualifying broker)	First	Middle	Suffix
JEANSONNE	JANA	NICOLE	
License number of real estate company: CQ 1030955			
Name of real estate company: REGENCY REALTY SERVICES			
Primary Phone Number	Primary E-Mail Address		
1-561-394-4600 / 0	INFO@REGENCYFLORIDA.COM		
Signature of qualifying broker that is adding or terminating employee:			

**Section IV – Affirmation By Written Declaration**

AFFIRMATION BY WRITTEN DECLARATION	
<p>I certify that I am empowered to execute this application as required by Section 559.79, Florida Statutes. I understand that my signature on this written declaration has the same legal effect as an oath or affirmation. Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. <b>I understand that falsification of any material information on this application may result in criminal penalty or administrative action, including a fine, suspension or revocation of the license.</b></p>	
Signature:	Date:
Print Name:	



## New Associate Profile

6601 Park of Commerce Blvd. #12-112 Boca Raton, FL 33487

[www.RegencyFlorida.com](http://www.RegencyFlorida.com) P +1.561.394.4600 Email: [Info@RegencyFlorida.com](mailto:Info@RegencyFlorida.com)

Name as on RE License: \_\_\_\_\_

RE License Number: \_\_\_\_\_ PA: Y/ N LLC: Y/N

Address (same w/DBPR) \_\_\_\_\_

Direct Phone Number (same w/Board, MLS, DBPR): \_\_\_\_\_

Professional Email Address: \_\_\_\_\_

Professional Website: \_\_\_\_\_

Board of REALTORS® \_\_\_\_\_ Designations: \_\_\_\_\_

Specialties/Niche: \_\_\_\_\_

Languages fluent: \_\_\_\_\_ Spoken: \_\_\_\_\_

Current company: \_\_\_\_\_ Split: \_\_\_\_\_

How long with current company? \_\_\_\_\_ In RE business? \_\_\_\_\_

Why leaving? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Amount of RE sales in last 2 years: \_\_\_\_\_ Leases: \_\_\_\_\_

Amount of Commercial sales/Involvement in last 5 years: \_\_\_\_\_

\_\_\_\_\_

Anticipated source of business? \_\_\_\_\_

\_\_\_\_\_

Any professional involvement w/Board of REALTORS®, NAR, FAR or MLS?

\_\_\_\_\_

\_\_\_\_\_

Any experience with DBPR, FREC or REALTORS® Professional Standards?

\_\_\_\_\_

What Type of RE Technology are you using?

\_\_\_\_\_

Why Real Estate and what are your goals?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How did you hear about Regency?

\_\_\_\_\_

# Request for Taxpayer Identification Number and Certification

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give form to the  
requester. Do not  
send to the IRS.**

**Before you begin.** For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

<b>Print or type.</b>  <b>See Specific Instructions on page 3.</b>	<b>1</b>	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	<b>2</b>	Business name/disregarded entity name, if different from above.	
	<b>3a</b>	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ <b>Note:</b> Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.  <input type="checkbox"/> Other (see instructions) _____	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____  <i>(Applies to accounts maintained outside the United States.)</i>
	<b>3b</b>	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ <input type="checkbox"/>	
	<b>5</b>	Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
	<b>6</b>	City, state, and ZIP code	
	<b>7</b>	List account number(s) here (optional)	

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

<b>Social security number</b>									
				-					
<b>or</b>									
<b>Employer identification number</b>									

**Note:** If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person	Date
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

# Regency Realty Services Business Card Order Form

(500 pc & 1 proof only) \$89 paid to Regency Realty Services Y N



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REALTOR® Name/Designation

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Title/Specialties

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Direct Phone Number

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Professional Email

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Website/Languages

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Facebook/Instagram, or any other social media sites

## Regency Realty Services Name Badge Order Form

Form of payment to Regency Realty Services: \$49 per piece cash/check

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QUANTITY

IMPRINT NAME

IMPRINT TITLE

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