REVOCATION OF ELECTION TO BE EXEMPT

| STATE USE ONLY | | | | | |
|-----------------------|--|--|--|--|--|
| Effective/Issue Date: | | | | | |
| Control Number: | | | | | |
| Postmark Date: | | | | | |
| Received Date: | | | | | |

SOCIAL SECURITY NO.

DATE SIGNED

PLEASE TYPE OR PRINT

| I hereby revoke an exemption I currently hold as a (check only one box in this section): CONSTRUCTION INDUSTRY Sole Proprietor Partner Corporate Officer (your corporate title: | | | | | |
|---|--|---------------------|--------|---|------|
| NON-CONSTRUCTION INDUSTRY Corporate Officer (your corporate title: | | | | .) | |
| | ECTION TO BE EXEMPT APPLY TO THE BUSINESS ENTITY | | | | |
| Business Name: | Trade Name; d/b/a; or a/k/a: | | | | |
| Business Mailing Address: | | City: | State: | | Zip: |
| County: | Phone No.: | Nature of Business: | | FEIN: | |
| Unemployment Compensation Tax No: | Date Business Established: | No. of Employees: | | Sec. Of State, Div. Of Corp. Reg. No.: | |
| UNDERSTAND THAT IF I AM UBCONTRACTOR I MUST NO | | | | | |

Workers' Compensation Information Online - http://www.fldfs.com/WC/

NOTIFICATION THAT YOU HAVE CHOSEN TO REVOKE YOUR EXEMPTION FROM CHAPTER 440, FLORIDA STATUTES

SHALL BE GIVEN BY THE DIVISION TO ANY INSURER ON RECORD WITH THE DIVISION AS A PROVIDER OF

WORKERS' COMPENSATION INSURANCE TO THE BUSINESS ENTITY NAMED HEREIN.

TYPE/PRINT NAME OF EXEMPTION HOLDER

SIGNATURE OF EXEMPTION HOLDER

SUBMIT THIS FORM TO THE DISTRICT OFFICE LISTED BELOW THAT IS CLOSEST TO YOUR PLACE OF BUSINESS:

WORKERS' COMPENSATION COMPLIANCE FIELD OFFICES

9000 REGENCY SQUARE BLVD. SUITE #212 JACKSONVILLE, FL, 32211-8100 TELEPHONE (904) 798-5806

2012 CAPITAL CIRCLE SE SUITE #102 HARTMAN BLDG. TALLAHASSEE, FL 32399-2161 TELEPHONE (850) 414-1237 or (850) 488-2717

3670-A NORTH L STREET 1ST FLOOR PENSACOLA, FL 32505-5217 TELEPHONE (850) 595-5505

499 NORTHWEST 70TH AVENUE SUITE #116 PLANTATION, FL 33317 TELEPHONE (954) 585-2660 or (954) 585-2668

9215 N. FLORIDA AVE. SUITE #107 TAMPA, FL 33612 TELEPHONE (813) 930-7558

400 WEST ROBINSON ST ROOM #211 NORTH TOWER ORLANDO, FL 32801 TELEPHONE (407) 245-0896 1111 NE 25TH AVE. SUITE #403 OCALA, FL 34470 TELEPHONE (352) 401-5350

2686 CHAPMAN DR. PANAMA CITY, FL 32405 TELEPHONE (850) 747-5425

3111 SOUTH DIXIE HWY. SUITE #123 WEST PALM BEACH, FL 33405 TELEPHONE (561) 837-5412

12381 S. CLEVELAND AVE. SUITE #506 FT. MYERS, FL 33907 TELEPHONE (239) 278-7239

1718 MAIN ST. SUITE #201 SARASOTA, FL 34236 TELEPHONE (941) 361-6022

401 NW 2nd AVE. SUITE #321 SOUTH TOWER MIAMI, FL 33128 TELEPHONE (305) 377-5385