



## INVESTOR ADDRESS CHANGE REQUEST

PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION

Investor Number: \_\_\_\_\_

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

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

New Daytime Phone #: \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

New Address: **LEGAL STREET ADDRESS REQUIRED**

\_\_\_\_\_  
\_\_\_\_\_

Additional Mailing Option for a PO Box: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Effective Date: \_\_\_\_\_

### ALL TITLEHOLDER SIGNATURES ARE REQUIRED.

\_\_\_\_\_  
Investor Signature Date Investor Signature Date

WHEN COMPLETED PLEASE PRINT AND MAIL  
TO:

Silver Star Properties  
**Attention: Investor Services Department**  
2401 Kerner Boulevard  
San Rafael, CA 94901-5569

FOR ASSISTANCE IN COMPLETING THIS FORM  
PLEASE CALL THE INVESTOR SERVICES DEPARTMENT AT 855-223-1754