



# PUBLISHER OWNERSHIP CHANGE FORM

**Fee: \$75.00.** Please include a check or money order with this form. Changes will not be made if payment is not received.

Please use this form to notify BMI of a change in the ownership of your BMI publishing company. If only the company name has changed please use the PUBLISHER NAME CHANGE FORM.

If both the name and ownership of your BMI publishing company are changing you will need to complete and return this form and the PUBLISHER NAME CHANGE FORM. If the forms are submitted together the fee is \$75. If the forms are submitted separately a \$75 fee will be required for each form.

**Date:** \_\_\_\_\_

**Publishing Company Name:** \_\_\_\_\_ **BMI account #:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

**Phone:** (    ) \_\_\_\_\_ - \_\_\_\_\_ **Fax:** (    ) \_\_\_\_\_ - \_\_\_\_\_

**Email:** \_\_\_\_\_ **Website:** \_\_\_\_\_

Do you wish to have your company contact information listed on bmi.com?     Yes     No

**New Ownership Structure:** *Please complete one section only A, B, C or D*

**A. Individual Ownership/DBA**

*Full Legal Name of Owner:* \_\_\_\_\_ *SS#* \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

*Home Address* \_\_\_\_\_

**B. Partnership**

TID#/EIN: \_\_\_\_\_  
(Cannot be a Social Security Number)

List all Partners:

<i>Legal Name</i>	<i>Ownership %</i>	<i>Home Address</i>	<i>SS#/EIN</i>
_____	_____	_____	_____-_____-_____
_____	_____	_____	_____-_____-_____
_____	_____	_____	_____-_____-_____
_____	_____	_____	_____-_____-_____
_____	_____	_____	_____-_____-_____

**C. Limited Liability Company (LLC)**

**IMPORTANT:** *A copy of the Articles of Organization must be included with this form.*

TID#/EIN: \_\_\_\_\_ State of Organization: \_\_\_\_\_

List all Members:

<i>Legal Name</i>	<i>Ownership %</i>	<i>Home Address</i>	<i>SS#/EIN</i>
_____	_____	_____	____-____
_____	_____	_____	____-____
_____	_____	_____	____-____
_____	_____	_____	____-____
_____	_____	_____	____-____

If the LLC is member-managed (as authorized under the Articles of Organization), please list all managers:

<i>Legal Name</i>	<i>Home Address</i>	<i>SS#/EIN</i>	Are they authorized to sign agreements and otherwise act on behalf of the company?
_____	_____	____-____	_____
_____	_____	____-____	_____
_____	_____	____-____	_____
_____	_____	____-____	_____
_____	_____	____-____	_____

**D. Corporation**

**IMPORTANT:** *A copy of the Certificate of Incorporation must be included with this form*

TID#/EIN: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_

List all Officers:

<i>Legal Name</i>	<i>Title</i>	<i>Home Address</i>	<i>SS#/EIN</i>
_____	_____	_____	____-____
_____	_____	_____	____-____
_____	_____	_____	____-____
_____	_____	_____	____-____
_____	_____	_____	____-____

List all Stockholders:

<i>Legal Name</i>	<i>Ownership %</i>	<i>Home Address</i>	<i>SS#/EIN</i>
_____	_____	_____	____-____-____
_____	_____	_____	____-____-____
_____	_____	_____	____-____-____
_____	_____	_____	____-____-____
_____	_____	_____	____-____-____

Authorized Signature: \_\_\_\_\_  
(Signature of owner, partner, officer, or member/manager)

Name (please print): \_\_\_\_\_ Title: \_\_\_\_\_

*Please return the completed form, the \$75 fee, and if applicable the additional documentation required for Corporations and LLC's to:*

**BMI**  
**Publisher Administration**  
**10 Music Square East**  
**Nashville, TN 37203**