Publix. PROFIT Plan Address Change Authorization Form

Non-Publix associates

Use this form to update your PROFIT Plan account address.

- 1. Complete the information below, print, sign and return.
- 2. Mail the completed form to: Publix Super Markets, Inc. Retirement Department, P.O. Box 32040, Lakeland, Florida 33802-2040.

Current Publix associates

Log in to PASSport to update your address.

Personal Information				
Name:				
Social Security Number:				
Address or Phone Number Changes				
Street Address:				
City:	State:		ZIP Code:	
Email Address:	Phone Numb	er: <u>(</u>	<u> </u>	
Security Verification Method for Publix Stockh	older Online (if re	egistere	d for an acco	ount)
If you're updating your phone number and are currently registe security verification method for the website.	red for a Publix Stockh	nolder Onli	ne account, plea	ase select your preferred
Remember: You must receive a text or answer the voice call at	t this phone number in	order to lo	og in.	
Text Message (SMS). You'll receive a verification code by text message and need to enter it on screen.				
Voice Call. You'll receive a phone call and need to respon	nd using your phone's	keypad.		
Signature				
I hereby authorize Publix Super Markets, Inc. (Publix) to update	e the address for my F	ROFIT Pla	an account.	
Signature:		D	ate:	