



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
1/5/2023

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY Plastridge Insurance Agency 2100 N. Dixie Highway Boca Raton, FL 33431	PHONE (A/C, No, Ext): (561) 395-1433	COMPANY Citizens Property Insurance Co 6676 Corporate Ctr Parkway Jacksonville, FL 32216-6105
FAX (A/C, No): (561) 395-4755	E-MAIL ADDRESS: bocadocs@plastridge.com	
CODE: 2071	SUB CODE:	
AGENCY CUSTOMER ID #: COUNCLU-05		
INSURED Country Club Tower of Coral Springs Association, Inc. 10777 Sample Road Coral Springs, FL 33065	LOAN NUMBER	POLICY NUMBER 06495105
	EFFECTIVE DATE 12/27/2022	EXPIRATION DATE 12/27/2023
		☐ CONTINUED UNTIL TERMINATED IF CHECKED
	THIS REPLACES PRIOR EVIDENCE DATED:	

PROPERTY INFORMATION

LOCATION/DESCRIPTION Loc # 1, Bldg # 1, 10777 W Sample Road, Coral Springs, FL 33065, 209 Unit, 12 Story Residential Condo
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVERAGE INFORMATION

PERILS INSURED	BASIC	BROAD	SPECIAL	AMOUNT OF INSURANCE	DEDUCTIBLE
COVERAGE / PERILS / FORMS					
Loc # 1, Bldg # 1					
Condo Association Building, Special (Including theft)				\$37,814,100	5,000
POOL, Special (Including theft)				\$91,300	5,000
Contents, Special (Including theft)				\$100,000	5,000
5% Calendar Year Hurricane Deductible					
Sinkhole Coverage Included					
100% Coinsurance; Replacement Cost					
Equipment Breakdown; Policy #2S83761-1				\$37,914,100	2,500
Difference in Conditions				\$25,000,000	5,000
Ordinance or Law Coverage Included					

REMARKS (Including Special Conditions)

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CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

NAME AND ADDRESS	ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	LOSS PAYEE
	MORTGAGEE		
	LOAN #		
For Information Only	AUTHORIZED REPRESENTATIVE 		



COUNCLU-05

VHUERTA

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/5/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Plastring Insurance Agency 2100 N. Dixie Highway Boca Raton, FL 33431	CONTACT NAME:		
	PHONE (A/C, No, Ext):	(561) 395-1433	FAX (A/C, No): (561) 395-4755
	E-MAIL ADDRESS:	bocadocs@plastring.com	
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : James River Insurance Company		12203
INSURED Country Club Tower of Coral Springs Association, Inc. 10777 W Sample Road Coral Springs, FL 33065	INSURER B : Technology Insurance Company		42376
	INSURER C : Philadelphia Indemnity Ins Co.		18058
	INSURER D : Greenwich Insurance Company		22322
	INSURER E :		
	INSURER F :		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PROJECT ☐ LOC OTHER:			00125664-1	12/28/2022	12/28/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 0 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	☒ AUTOMOBILE LIABILITY ☐ ANY AUTO OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY			00125664-1	12/28/2022	12/28/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	☒ UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE DED ☒ RETENTION \$ 0			00125662-1	12/28/2022	12/28/2023	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N N	N / A	TWC4093495	5/13/2022	5/13/2023	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
C	Crime			PCAC013091-0320	12/28/2022	12/28/2023	Employee Dishonesty 2,000,000
D	D&O			PDO7477154-02	12/28/2022	12/28/2023	Per Claim/Aggregate 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

For Information Only

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AUTHORIZED REPRESENTATIVE



ADDITIONAL REMARKS SCHEDULE

AGENCY Plastridge Insurance Agency		NAMED INSURED Country Club Tower of Coral Springs Association, Inc. 10777 W Sample Road Coral Springs, FL 33065 Broward
POLICY NUMBER SEE PAGE 1		
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Assault & Battery Sublimit
\$100,000 - Per Occurrence
\$200,000 - Aggregate



Renewal Certificate Instructions for Homeowners & Management Co.

A screenshot of the "FIRST TIME USER REGISTRATION" page. It shows a dropdown menu with the text "Please Select Here" at the top. The menu is open, showing a list of user roles: "Please Select Here", "Insurance Agent", "Financial Institution", "Mortgage Broker/Company", "Homeowner/Home Buyer" (highlighted in blue), "Mgmt Company/Association", "Closing Agent/Escrow Officer", "Attorney", and "Real Estate Agent". An arrow points from step 2 of the instructions to this menu.A screenshot of the "Control Center" dashboard. It has a header "Control Center" and a list of links: "Evidence of Insurance: Order a certificate of insurance.", "History: View previous orders.", "Account Profile: Edit your account profile and change your password.", and "Orders Pending: View submitted orders that are pending third party payment." There is also a checkbox labeled "Check here if you are paying for a previous order." An arrow points from step 4 of the instructions to the "Evidence of Insurance" link.A screenshot of the "Select Delivery Method" form. It has a header "Select Delivery Method" and a note: "The cost for this renewal certificate is identified below. If charges apply, you will not be charged until you receive your certificate." There are two radio button options: "Email \$0.00 (USD)" and "Fax \$0.00 (USD)". Below the "Fax" option are three input fields for a phone number. At the bottom are "Back" and "Continue" buttons. An arrow points from step 11 of the instructions to this form.

1. Visit eoidirect.com
2. Register as a First Time User
3. Log into your account.
4. Click on "Evidence of Insurance".
5. Search for your condominium name
6. Select your association, "Continue".
7. Choose the 4th option that indicates you received a letter from your lender, "Continue".
8. Fill in the Homeowner's last name and loan number, "Continue".
9. Fill out all required fields for Homeowner and Lender, "Continue".
10. Confirm the order information, "Continue"
11. Select delivery method where you would like the certificate sent.

After selecting the delivery method where you want the Certificate of Insurance sent, you will see 1 of 3 sets of instruction. Proceed accordingly.

What the website says...

Thank You For Your Order!

Order Number: 1300789

Description: 1 Certificate of property insurance via Email

Your renewal certificate is almost ready. Please follow the steps below so we can deliver your certificate:

Instructions:

1. E-mail the letter you received from your lender to lenderletters@eoidirect.com or Fax the letter to (208) 379-4341.  [No E-mail or Fax Machine?](#)
2. *Please reference Order #1300789 on your e-mail or fax.* We cannot process your request without your order number.

Thank You For Your Order!

Order Number: 1300790

Description: 1 Certificate of property insurance via Email

Your renewal request has been forwarded to your insurance agent for review. E-mailed instructions will be sent to your User ID upon the agent's review. You may print this screen for your records.

Shipment Confirmation for Order #1300794

Your Certificate of property insurance has been sent via email to a.berger@eoidirect.com.

To view your certificate immediately, [Click here](#).

Contact EOI Direct to correct any errors made when ordering your certificate to avoid being charged again. Please include your order number with all EOI Direct correspondence.

Click **Continue** to go to your Control Center.

What this means for you...

We could not find a record of your loan information. Please e-mail or fax a copy of the letter your lender sent you to:

- lenderletters@eoidirect.com
- 208-379-4341

Once your letter is received, we will release your request

For quality assurance, the agent would like to review your request. Please allow 2-3 business days for your request to be processed. Once the request is reviewed, the certificate will be sent to the e-mail or fax you selected on the previous page.

Your request has been processed and sent. No further action is required.

For assistance with the website, please contact EOIDirect Monday-Friday 7:00am-6:00pm MST at 877-456-3643