

SERIECOLON

OAKCOUN-01

						(MM/DD/YYYY) 26/2024		
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			CONTACT NAME:	-				
AssuredPartners of Florida, LLC - Melbourne			PHONE (A/C, No, Ext): (321) 722-2338 FAX (A/C, No):(321) 722-2158					
1694 W Hibiscus Blvd Ste. B Melbourne, FL 32901			E-MAIL ADDRESS:					
			INSURER(S) AFFORDING COVERAGE					
INSURED The Oaks of Country Club Condominium Association, Inc. c/o Clover Key, Inc. 110 Imerpial Street Merritt Island, FL 32952			INSURER B : Greenwich Insurance Company				22322	
			INSURER C: Travelers Casualty and Surety Company				19038	
			INSURER D : Frontline Insurance Unlimited Company				10074	
							10074	
			INSURER E : INSURER F :					
COVERAGES CEF		TE NUMBER:					1	
			HAVE BEEN ISSUED		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 SUE	BR POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	rs		
A X COMMERCIAL GENERAL LIABILITY			(	(11111)	EACH OCCURRENCE	\$	1,000,000	
CLAIMS-MADE X OCCUR		GLWF17562629 001	2/24/2024	2/24/2025	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
					MED EXP (Any one person)	\$	5,000	
					PERSONAL & ADV INJURY	\$	1,000,000	
GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	2,000,000	
					PRODUCTS - COMP/OP AGG	\$	Included	
OTHER:					HNOA	\$	1,000,000	
AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$		
ANY AUTO					BODILY INJURY (Per person)	\$		
OWNED AUTOS ONLY SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$		
HIRED AUTOS ONLY AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$		
						\$		
B UMBRELLA LIAB OCCUR			0/0 //000 /		EACH OCCURRENCE	\$	5,000,000	
X EXCESS LIAB CLAIMS-MADE		APP#TBD	2/24/2024	2/24/2025	AGGREGATE	\$	5,000,000	
DED RETENTION \$					PER OTH-	\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N					STATUTE ER			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N / A				E.L. EACH ACCIDENT	\$		
If ves, describe under					E.L. DISEASE - EA EMPLOYEE	\$		
DÉSCRIPTION OF OPERATIONS below		107999014	2/24/2024	2/24/2025	E.L. DISEASE - POLICY LIMIT	\$	100,000	
C Fidelity D Property / Wind		1013630380	2/24/2024	2/24/2025	See Remarks		6,438,420	
		1013030300	2/24/2024	2/24/2023	See Nemarks		0,430,420	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC ***For Information Only***	LES (ACO	RD 101, Additional Remarks Schedu	lle, may be attached if mo	 re space is requi	red)			
CERTIFICATE HOLDER			CANCELLATION					

***For Information Only*** The Oaks of Country Club Condominium Association, Inc. c/o Clover Key, Inc.	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
110 Imerpial Street	AUTHORIZED REPRESENTATIVE
Merritt Island, FL 32952	Joh 15

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AGENCY CUSTOMER ID: OAKCOUN-01

LOC #: 1

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AGENCY AssuredPartners of Florida, LLC - Melbourne		NAMED INSURED The Oaks of Country Club Condominium Association, Inc. c/o Clover Key, Inc.
POLICY NUMBER SEE PAGE 1		The Oaks of Country Club Condominium Association, Inc. c/o Clover Key, Inc. 110 Imerpial Street Merritt Island, FL 32952
	NAIC CODE	
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1
ADDITIONAL REMARKS		
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACC	ORD FORM,	
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liabil	ity Insurance	
Remarks		
Residential Condominium (36 Units Total) Property Coverage: #4101-#4206 - 1600 Woodland Drive, Rockledge, FL 329 Building Limit: \$1,800,224 #8101-#8216 - 1600 Woodland Drive, Rockledge, FL 329 Building Limit: \$4,247,919 Common Amenities: \$390,277		
Deductibles: \$2,500 All Other Perils 5% Calendar Year Hurricane 1% All Other Wind/Hail		
Special Form / Replacement Cost / Co-Insurance: 100%	6	
Ordinance or Law: Coverage A - Full Coverage B/C - 2.5% Combined Limit		
General Liability Coverage: Policy includes the ISO form Separation of Insureds cla	ause	
Fidelity Coverage: Property Manager is included as Employee		
Directors & Officers Coverage: Travelers Casualty & Surety - Pol#107999014 - Eff 2/24/ \$1,000,000 Limit / \$1,000 Deductible	/24-2/24/25	