

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 1/19/2023

THIS EVIDENCE OF PROPERTY ADDITIONAL INTEREST NAMED COVERAGE AFFORDED BY THE ISSUING INSURER(S), AUTHORIZ	BELOW. THIS EVIDENCE POLICIES BELOW. TH	E DOES NO	OT AFFIRMAT	IVELY OR ANCE DOE	NEGATIV S NOT CO	ELY AN	IEND, EXTEND (OR ALTER THE
		** ************************************	<u> </u>			•		
AGENCY (A/C, No,	Ext): (561) 630-4955		COMPANY					
Plastridge Insurance Agency 10337 N. Military Trail Palm Beach Gardens, FL 33410			Citizens Pro 6676 Corpor Jacksonville	ate Ctr Par	kway			
FAX (A/C, No): (561) 630-4966 E-MAIL ADDRESS: F	palmbeachdocs@plastridge	.com						
CODE: 2071 AGENCY CUSTOMER ID #: LAKEHAR-03	SUB CODE:							
INSURED Lake Harbour Towers S 301 Lake Shore Drive	South Condominium Assoc	ciation Inc	LOAN NUMBER				POLICY NUMBER 21662633	
West Palm Beach, FL 3	3403		EFFECTIVE 40/24/0			ION DATE	CONTINUE	ED LINTII
			12/31/2			/2023	TERMINA	ED UNTIL ED IF CHECKED
			THIS REPLACES	S PRIOR EVIDI	INCE DATED:			
PROPERTY INFORMATION								
LOCATION/DESCRIPTION Loc # 1, Bldg # 1, 301 Lake Shore Dr, L	ake Park, FL 33403, 8 Story.	/ 84 unit cond	do tower					
THE POLICIES OF INSURANCE LI NOTWITHSTANDING ANY REQUIR EVIDENCE OF PROPERTY INSUR. SUBJECT TO ALL THE TERMS, EXC	EMENT, TERM OR COND ANCE MAY BE ISSUED OI	DITION OF A R MAY PERT	NY CONTRAC	T OR OTH	IER DOCU FORDED B	MENT V Y THE P	VITH RESPECT T OLICIES DESCRIE	O WHICH THIS BED HEREIN IS
COVERACE INFORMATION								
COVERAGE INFORMATION	PERILS INSURED	BASIC	BROAD	SPECIA	-			
	PERILS INSURED COVERAGE / PERILS / F		BROAD	SPECIAI	-	АМО	UNT OF INSURANCE	DEDUCTIBLE
Loc #1, Bldg #1 Building, Wind Only, Basic, Replacen	COVERAGE / PERILS / F		BROAD	SPECIAI	-	АМО	UNT OF INSURANCE \$19,887,000	DEDUCTIBLE
Loc # 1, Bldg # 1	COVERAGE / PERILS / F	FORMS	BROAD	SPECIAI	_	AMO		DEDUCTIBLE
Loc # 1, Bldg # 1 Building, Wind Only, Basic, Replacen 5% Wind/Hail Calendar Year/ 1% All C Equipment Breakdown - Travelers Ind	COVERAGE / PERILS / F nent Cost, Co Ins: NIL Other Wind demnity - eff: 12/31/2022-23	FORMS	BROAD	SPECIAI	-	АМО	\$19,887,000	
Loc # 1, Bldg # 1 Building, Wind Only, Basic, Replacen 5% Wind/Hail Calendar Year/ 1% All C	COVERAGE / PERILS / F nent Cost, Co Ins: NIL Other Wind demnity - eff: 12/31/2022-23	FORMS	BROAD	SPECIAL		АМО	\$19,887,000	
Loc # 1, Bldg # 1 Building, Wind Only, Basic, Replacen 5% Wind/Hail Calendar Year/ 1% All C Equipment Breakdown - Travelers Ind	COVERAGE / PERILS / Finent Cost, Co Ins: NIL Other Wind demnity - eff: 12/31/2022-23 ditions) at Lloyds #WKFCC-05054-6	FORMS	BROAD	SPECIAI		AMO	\$19,887,000	
Loc # 1, Bldg # 1 Building, Wind Only, Basic, Replacen 5% Wind/Hail Calendar Year/ 1% All C Equipment Breakdown - Travelers Ind Equipment Breakdown - Travelers Ind Special Conditions: Property X Wind Certain Underwriters 12/31/22-12/31/2023 301 Lake Shore Drive, West Palm Beat \$10,000,000 Primary Limit Building \$20,785,589 Carport #1 \$540,812 Carport #2 \$660,825	COVERAGE / PERILS / Finent Cost, Co Ins: NIL Other Wind demnity - eff: 12/31/2022-23 ditions) at Lloyds #WKFCC-05054-6	FORMS	BROAD	SPECIAL		AMO	\$19,887,000	
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AGENCY	CUSTOMER II	D: LAKEHAR-03
AGENCY	CUSTOMERIL): LAILLIAIL-00

CCARRICO

LOC #:



ADDITIONAL REMARKS SCHEDULE

Page	1	of	1

AGENCY		NAMED INSURED_		
Plastridge Insurance Agency		Lake Harbour Towers South Condominium Association Inc 301 Lake Shore Drive		
POLICY NUMBER		West Palm Beach, FL 33403		
21662633				
CARRIER	NAIC CODE			
Citizens Property Insurance Co	10064	EFFECTIVE DATE: 12/31/2022		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 27 FORM TITLE: EVIDENCE OF PROPERTY INSURANCE

Special Conditions:

Special Conditions: Carport #3 \$112,583 Pool \$60,000 Entrance Gates/Fencing \$113,141 TIV \$22,272,950 AOP Deductible \$10,000

Property X Wind Certain Underwriters at Lloyds #10149L22-0814 12/31/22-12/31/2023 301 Lake Shore Drive, West Palm Beach, FL 33403 \$12,272,950 Excess of \$10,000,000 AOP Deductible \$10,000



A Stock Company P.O. Box 33003 St. Petersburg, FL 33733-8003 Customer Service: 1-800-820-3242 Claims: 1-800-725-9472

FFL99.001 1021 0087062 1/28/22 2000 11523 FLD RCBP

National Flood Insurance Policy

FLOOD DECLARATIONS	PAGE
RENEWAL	

Policy Number	NFIP Policy Number	Product Type:
09 1151068024 08	1151068024	Residential Condominium Building Policy Form

Policy Period	Date of Issue	Agent Code	Prior Policy Number
From: 2/03/22 To: 2/03/23 12:01 am Standard Time	01/28/2022	0087062	1151068024

Agent (561)276-5221 THE PLASTRIDGE AGENCY INC 820 NE 6TH AVE DELRAY BEACH FL 33483-5735

LAKE HARBOUR TOWERS S 301 LAKE SHORE DR WEST PALM BEACH FL 33403-3575

DELRAYDOCS@PLASTRIDGE.COM

Property Location (if other than above) 301 LAKE SHORE DR, LAKE PARK FL 33403

Address may have been changed in accordance with USPS standards.

Rating Information

Rate Category: Rating Engine

Primary Residence: N

Building Occupancy: Residential Condominium Building Building Description: Entire Residential Condo Building

Elevation Difference: 0

Property Description:Slab on Grade, 8 floors

Flood Risk: AE

First Floor Height: .8 ft

Method Used to Determine First Floor Height: Elevation Certificate

Date of Construction: 01/01/1973

Prior NFIP Claims: Number of Units: 84

Replacement Cost Value: 27,233,510

Coverage		Deductible	Annual Premium
BUILDING	\$21,000,000	\$1,250	\$11,866.00
CONTENTS	\$100,000	\$1,250	\$249.00
		ICC Premium:	\$75.00
Your property's NFIP	, , , , , , , , , , , , , , , , , , ,	Community Rating Discount:	\$1,224.00
can affect your premi	ium. For more information	FULL RISK PREMIUM:	\$10,966.00
contact your insurance	ce agent or company.	DISCOUNTED PREMIUM:	\$10,966.00
		Reserve Fund Assessment:	\$1,974.00
		Federal Policy Service Fee:	\$1,780.00
		HFIAA Surcharge:	\$250.00
		TOTAL WRITTEN PREMIUM AND FEES:	\$14,970.00

Premium Paid by: Insured

Forms and Endorsements:

THIS IS NOT A BILL

FFL 99.310 0120 0120 WFL 99.416 1021 1021 WFL 99.116 0614 0614 WFL 99.116 1021 1021

This policy is issued by NAIC company 11523 Wright National Flood Insurance Company A stock company Copy Sent To: As indicated on back or additional pages, if any.

Patricia Templeton-Jones, President





CCARRICO

ACORD*

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/19/2023

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	CONTACT NAME:			
Plastridge Insurance Agency 10337 N. Military Trail	PHONE (A/C, No, Ext): (561) 630-4955 FAX (A/C, No): (561) 630-4966		
Palm Beach Gardens, FL 33410	E-MAIL PARTIESS: palmbeachdocs@plastridge.com			
	INSURER(S) AFFORDING COVERAGE	NAIC#		
	INSURER A: CUMIS Specialty Insurance Company, Ir	nc. 12758		
INSURED	INSURER B: Greenwich Insurance Company	22322		
Lake Harbour Towers South Condominium Association Inc	INSURER C: Technology Insurance Company	42376		
301 Lake Shore Drive	INSURER D: Continental Casualty	20443		
West Palm Beach, FL 33403	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.

Type of NSURANCE NSD NVD POLICY NUMBER (MM/DD/YYY) (MM/DD/YY			JSIONS AND CONDITIONS OF SUCH							
A X COMMERCIAL GENERAL LIABILITY CIUCAP101548-00	INSR LTR		TYPE OF INSURANCE	ADDL SU	IBR VD POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMIT	s	
MED EXP (Any one person) \$ 5,000	Α	X	COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE	\$	1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY JECT LOC DTHER: S COMBINED SINGLE LIMIT S 1,000,000			CLAIMS-MADE X OCCUR		CIUCAP101548-00	12/31/2022	12/31/2023	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	50,000
Comparison Com								MED EXP (Any one person)	\$	5,000
Note								PERSONAL & ADV INJURY	\$	1,000,000
A AUTOMOBILE LIABILITY		GEN						GENERAL AGGREGATE	\$	2,000,000
AUTOMOBILE LIABLITY ANY AUTO OWNED AUTOS ONLY X HIRED AUTOS ONLY X AUTOS ONLY X EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ OWNERS COMPRENSATION ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/RIMMERS REXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below A UTOMOBILE LIABILITY COMBINED SINGLE LIMIT \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per person)		X	POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$	2,000,000
ANY AUTO OWNED AUTOS ONLY X HIRED AUTOS ONLY X EXCESS LIAB DED X RETENTION \$ OWNERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PASTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below A Crime CIUCAP101548-00 12/31/2022 12/31/2022 12/31/2023 12/31/2022 12/31/2023 12/31/2022 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 PPR PR P			OTHER:						\$	
OWNED AUTOS ONLY X MON-OWNED S S B	Α	AUT	OMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
AUTOS ONLY					CIUCAP101548-00	12/31/2022	12/31/2023	BODILY INJURY (Per person)	\$	
B			AUTOS ONLY AUTOS						\$	
B		X	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$	
X EXCESS LIAB CLAIMS-MADE PPP7492646L22A-00 12/31/2022 12/31/2023 12/31/2023 AGGREGATE \$ Aggregate \$ 10,000,000									\$	
DED X RETENTION \$ 0 Aggregate \$ 10,000,000	В		UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$	10,000,000
C WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below A Crime TWC4176522 12/31/2022 12/31/2022 12/31/2023 PER STATUTE STA		X	EXCESS LIAB CLAIMS-MADE		PPP7492646L22A-00	12/31/2022	12/31/2023	AGGREGATE	\$	
AND EMPLOYERS' LIABILITY			DED X RETENTION\$					Aggregate	\$	10,000,000
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below A Crime TWC4176522 12/31/2022 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 12/31/2023 Prop Mgr Included 250,000	С	WOR	EMPLOYERS' LIABILITY					PER OTH- STATUTE ER		
Mandatory in NH)		ANY	PROPRIETOR/PARTNER/EXECUTIVE V/N	N/A	TWC4176522	12/31/2022	12/31/2023	E.L. EACH ACCIDENT	\$	500,000
DÉSCRIPTION OF OPERATIONS below		1.	• •	N/ A				E.L. DISEASE - EA EMPLOYEE	\$	500,000
		DÉS	CRIPTION OF OPERATIONS below						\$	500,000
D Directors & Officers 618766721 12/31/2021 12/31/2022 D&O LIABILITY 1,000,00	Α	Crir	ne		CIUCAP101548-00	12/31/2022	12/31/2023	Prop Mgr Included		250,000
	D	Dire	ectors & Officers		618766721	12/31/2021	12/31/2022	D&O LIABILITY		1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Residential Condominum Association - 84 Units

CERTIFICATE HOLDER	CANCELLATION
SEE HOLDER ON ATTACHED ACORD 27	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE
	Mel



To: Requestors of Condominium & HOA Association Certificates of Insurance

From: Plastridge Insurance Agency

Re: Retrieving Condominium & HOA Association Certificates of Insurance

We are pleased to advise that as of August 1, 2021 you will be able to obtain Condominium/HOA Certificates of Insurance (COI) by using the online delivery service from www.eoidirect.com for immediate access.

EOI Direct provides state-of-the-art, round-the-clock, online access to insurance information for lenders, mortgage brokers, closing agents, homeowners, and realtors in need of Master Policy data for Condo/ HOA associations.

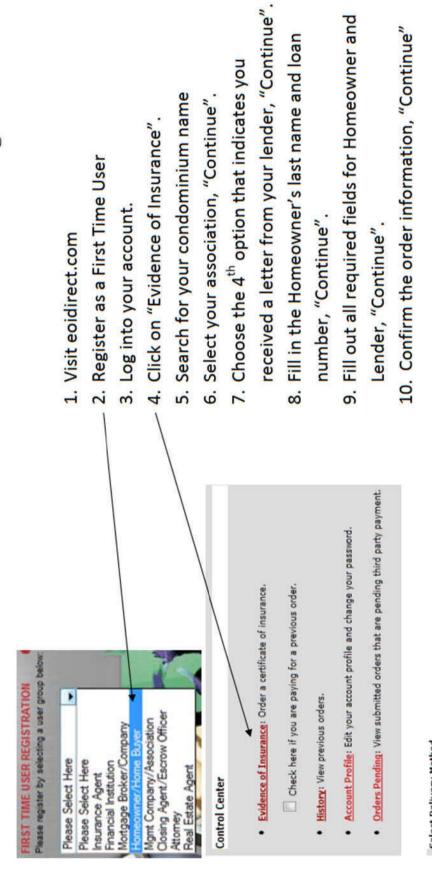
- To request a certificate of insurance or to view the policy coverage listed on a particular certificate, please visit www.eoidirect.com.
- Once you have logged on to your account, click on "Evidence of Insurance" to search and access the association policy information you are seeking.
- If you are a first-time user, follow the link (<u>www.eoidirect.com</u>) to register and then write down your User ID and Password so you can log in to your account when prompted. There is no cost to register for access
- Please note a delivery charge may apply for mortgagee clause additions, and loan origination requests.

EOI Direct's customer service department is available from 9AM to 8PM (EST) Monday through Friday to provide additional assistance toll-free at 877-456-3643.

Please share this important notice with those parties that regularly request condominium certificates of insurance from our agency. This new process for obtaining certificates of insurance will allow us to improve the service efficiency for all Certificate of Insurance requesters.



Renewal Certificate Instructions for Homeowners & Management Co.



The cost for this renewal certificate is identified below. If charges apply, you will not be charged until you receive your certificate. Select Delivery Method Fax \$0.00 (USD) 6 Email \$0.00 (USD) Back Continue

11. Select delivery method where you would like the certificate sent.

exclusions, limitations and conditions of each. Most quotes are valid for approximately 30 days, subject to policy effective date and changes in insurance companies' rates. Binding of coverage can be restricted by DISCLAIMER: This proposal is provided for illustration purposes only and is not a legal contract. The coverage offered is based on information provided by you. Please refer to the actual policies for the terms, Definitions of insurance terms, coverage, and policy types are available at https://www.plastridge.com/glossary/ storm activity or other factors. 17

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

processed. Once the request is reviewed, the certificate will be request. Please allow 2-3 business days for your request to be We could not find a record of your loan information. Please sent to the e-mail or fax you selected on the previous page. For quality assurance, the agent would like to review your e-mail or fax a copy of the letter your lender sent you to: Once your letter is received, we will release your request What this means for you... lenderletters@eoidirect.com 208-379-4341 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 rink this screen for your records. Pfease reference Order #1300789 on your e-mail or fax. We cannot process your request without your order number. red from your lender to lend the letter to (201) 275-4341. Plo E-mail or Fax Machine? 1 Certificate of property insurance via Email . Certificate of property insurance via Email 1. E-mail the letter you recei What the website says... Shipment Confirmation for Order #1300794 1300790 1300789 Thank You For Your Order! Thank You For Your Order! Back Continue Back Continue Order Number: Order Number Instructions Instructions Description: Descriptions

For assistance with the website, please contact EOIDirect Monday-Friday 9:00am-8:00pm EST at 877-456-3643

Your request has been processed and sent. No further action

is required.

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.

exclusions, limitations and conditions of each. Most quotes are valid for approximately 30 days, subject to policy effective date and changes in insurance companies' rates. Binding of coverage can be restricted by This proposal is provided for illustration purposes only and is not a legal contract. The coverage offered is based on information provided by you. Please refer to the actual policies for the terms, Definitions of insurance terms, coverage, and policy types are available at https://www.plastridge.com/glossary/ storm activity or other factors.





POLICY CHANGE SUMMARY

POLICY NUMBER: 08653714 - 1	POLICY PERIOD FROM 12/31/2022		TO	12/31/2023	
	at 12:01 a.m. Eastern	Time			
Transaction: AMENDED DECLARATIONS	Effective: 12/31/20)22	· · · · · · · · · · · · · · · · · · ·		

item	Prior Policy Information	Amended Policy Information
Policy Info		
Billing Contact: FIRST INSURANCE FUNDING CORP		Added
Premium Finance Company Ext		FIRST INSURANCE FUNDING CORP

This summary is for informational purposes only and does not change any of the terms or provisions on your policy. Please carefully review your policy Declarations and any attached forms for a complete description of coverage.

PCS 01 14	Page 1 of 1



COMMERCIAL PROPERTY POLICY DECLARATIONS

POLICY NUMBER: 08653714 - 1	POLICY PERIOD FROM 12/31/2022	TO 12/31/2023	
	at 12:01 a.m. Eastern Time		
Transaction: AMENDED DECLARATIONS	Effective: 12/31/2022	CR-W	
Pay Plan: Citizens Full Pay	Bill: Insured Billed		
Named Insured and Mailing Address	Agent	FI. Agent Lic. #	
Lake Harbour Towers South Condominium Association Inc 301 LAKE SHORE DR WEST PALM BEACH, FL 33403-3575	BRENDAN LYNCH The Plastridge Agency, Inc. 10337 N. MILITARY TRAIL PALM BEACH GARDENS, FL 33410	D055108	
Telephone: 561-616-0555	Telephone: 561-630-4955		

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENTS.

	PREMIUM
COMMERCIAL PROPERTY COVERAGE	\$244,981.00
Required Additional Charges:	
2022 Florida Insurance Guaranty Association (FIGA) Regular Assessment 2022-B Florida Insurance Guaranty Association (FIGA) Regular Assessment Catastrophe Financing Surcharge Tax-Exempt Surcharge	\$1,715.00 \$3,185.00 \$36,747.00 \$4,287.00
TOTAL:	\$290,915.00
Change in Policy Premium:	\$0.00

The portion of your premium for

Hurricane Coverage is: \$229,561.00 Non - Hurricane Coverage is: \$15,420.00

See Form CDEC-FE-SCH - Commercial Policy Forms And Endorsements Schedule

Countersigned: 01/11/2023

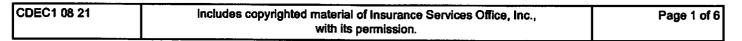
BY:

Issued Date: 01/11/2023

Authorized By: BRENDAN LYNCH

Bany J. Gilway

Barry J. Gilway
President/CEO and Executive Director
Citizens Property Insurance Corporation







Policy Number: 08653714 - 1 Effective Date: 12/31/2022 to 12/31/2023

Insured Name: Lake Harbour Towers South Condominium Association Inc

LOCATION NO. 1	BUILDING (OR SPECIAL CLA	ASS ITEM NO. 1	CSP C	ode: 0333		
BUSINESS DESCRIPTION	ON: Condominiums -n	esidential (associa	ation risk only) - with	out mercan	tile occupancies -C	ver 30 units	
DESCRIPTION OF PRE	MISES 1: 301	LAKE SHORE DI	R 8 Sto	ory Wind Re	esistive 84-Unit Co	ndo Bldg	
Location Address 301 LAKE SHORE DR WEST PALM BEACH, FL 3	ation Address		Group I Construction N/A Group I Territory N/A Group I Territory N/A N/A Group II Territory N/A N/A		Protection Class N/A Coastal Territory Palm Beach - 38	BCEGS Grade Ungraded No. of Units 84	
COVERAGES PROVIDE	D Insurance at the is Shown.	Described Prem	ises Applies Only F	or Coveraç	jes For Which A L	imit Of insuranc	
		Covered	·				
_	Limit Of	Causes	Total				
Coverage	Insurance		Replacement Cos		Premium	First Loss	
Building (Bldg)	\$19,887,000	Wind	\$19,887,000	A-Rate	\$214,203.00	• • • • •	
					FHCF Build-Up Premius	m: \$10,003	
OPTIONAL COVERAGE	S Applicable Only	When Entries A	e Made in The Sch	edule Belo	W		
Coverage	Pro	emium	1	R	eplacement Cost		
			8.2	ilding Yes	Business Per	ness Personal Property	
DEDUCTIBLE							
Other Windstorm or	Hail Deductible		/ear Hurricane je Deductible				
Deductible Percentage (D	eductible Amount)	Deductible Percent	age (Deductible Amount)				
Bldg: 1% (\$1	98,870)	Bldg: 5%	6 (\$994,350)				
WINDSTORM MITIGATI	ON FEATURES						
Terrain C	Year Built 1974	Roof Cover FBC Equivalent (Level B)	Roof Deck Level C (Reinford Concrete Roof De	ed Co	oof-Wall onnection N/A	SWR Yes	
Building Type Type III	Roof Shape N/A		Protection F None	BC Wind : N/A	Speed FBC	Wind Design N/A	
*A premium adjustment of construction technique					uilding's wind loss	mitigation feature	
Mortgageholder(s) & O	ther Policyholder Int	erest(s) – See Po	licy interest Sched	ule.			
	<u>-</u>						

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Policy Number: 08653714 - 1 Effective Date: 12/31/2022 to 12/31/2023

Insured Name: Lake Harbour Towers South Condominium Association Inc

OCATION NO. 1	BUILDING O	R SPECIAL CLA	SS ITEM NO. 2	CSP C	ode: N/A	
BUSINESS DESCRIPTIO	ON: Detached Open-S	ded Structures (S	Sheds, Carports, Ca	ıbanas, Mail	Kiosks)	
DESCRIPTION OF PREM	WISES 1: 301 i	AKE SHORE DE	R Car	port 1		
ocation Address 101 LAKE SHORE DR VEST PALM BEACH, FL 33		iroup I Construction N/A Group I Territory N/A	N/A		Protection Cla N/A Coastal Territ Palm Beach -	N/A ory No. of Units
COVERAGES PROVIDE	D Insurance at the I	Described Premi		For Coveraç		h A Limit Of Insuranc
Coverage	Limit Of Insurance	Covered Causes Of Loss	Total Replacement Co	st Rates	Prem	ilum First Loss
Special Class Item	\$541,000	Wind	\$541,000	Class	\$10.97	
	***************************************		V , U		FHCF Build-Up P	
OPTIONAL COVERAGE	S Applicable Only	When Entries Ar	re Made In The Sch			
Coverage	<u>```</u>	mium			eplacement (Cost
Tient			Building Yes		Business Personal Prop	
DEDUCTIBLE						
Other Windstorm or I	Hail Deductible		fear Hurricane ge Deductible			
Deductible Percentage (De	eductible Amount)	Deductible Percent	age (Deductible Amount)			
Bldg: 1% (\$5	5,410)	Bldg: 59	% (\$27,050)			
WINDSTORM MITIGATION	ON FEATURES					
Terrain C	Year Built 1974	Roof Cover N/A	Roof Deck N/A	•	Roof-Wall onnection N/A	SWR N/A
Building Type N/A	Roof Shape N/A	Opening	g Protection N/A	FBC Wind	Speed	FBC Wind Design N/A
*A premium adjustment construction techniques t					ling's wind los	s mitigation features
Mortgageholder(s) & O	ther Policyholder Int	erest(s) – See Po	olicy Interest Sche	dule.		
PREMIUM: \$11,934.00						

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CITIZENS PROPERTY INSURANCE CORPORATION 301 W BAY ST JACKSONVILLE FL 32202

COMMERCIAL PROPERTY POLICY DECLARATIONS

Policy Number: 08653714 - 1 Effective Date: 12/31/2022 to 12/31/2023

Insured Name: Lake Harbour Towers South Condominium Association Inc

LOCATION NO. 1	BUILDING O	R SPECIAL CLA	SS ITEM NO. 3	CSP C	ode: 0333		
BUSINESS DESCRIPTI	ON: Fully Enclosed Bat	h House					
DESCRIPTION OF PRE	MISES 1: 301 L	AKE SHORE DR		port #2 inclu losed bathro		cking, equipment and	
Location Address 301 LAKE SHORE DR WEST PALM BEACH, FL 3		roup I Constructio N/A Group I Territory N/A	on Group II Cons Wind Resi Group II Tel N/A	stive	Protection CI N/A Coastal Territ Palm Beach	Ungraded tory No. of Units	
COVERAGES PROVIDE	Insurance at the I is Shown.	Described Premis	ses Applies Only I	or Coverag	ges For Whic	h A Limit Of Insuranc	
Coverage	Limit Of Insurance	Covered Causes Of Loss	Total Replacement Co	st Rates	Prem	ilum First Loss	
Building (Bldg)	\$721,000	Wind	\$721,000	Class	\$5,84	5.00 N/A	
					FHCF Build-Up F	Premium: \$503	
OPTIONAL COVERAGE	S Applicable Only V	When Entries Are	Made In The Sch	edule Belo	w		
Coverage	Pre	mium		R	Replacement Cost		
		Building Yes		_	Business Personal Property		
DEDUCTIBLE							
Other Windstorm or	Hail Deductible		ear Hurricane e Deductible				
Deductible Percentage (D	Peductible Amount)	Deductible Percenta	ge (Deductible Amount)				
Bldg: 1% (\$	7,210)	Bldg: 5%	6 (\$36,050)				
WINDSTORM MITIGAT	ON FEATURES						
Terrain C	Year Built 1973	Roof Cover Unknown	Roof Deck Unknown	C	toof-Wall onnection Jnknown	SWR Unknown	
Building Type Type I	Roof Shape Unknown		Protection one	FBC Wind : N/A	Speed	FBC Wind Design N/A	
*A premium adjustment construction techniques					ing's wind los	s mitigation features	
Mortgageholder(s) & C	ther Policyholder Inte	rest(s) – See Po	licy Interest Sche	dule.			
PREMIUM: \$6,348.00		<u> </u>	-				









Policy Number: 08653714 - 1

Effective Date: 12/31/2022 to 12/31/2023

insured Name: Lake Harbour Towers South Condominium Association Inc

LOCATION NO. 1	BUILDING O	R SPECIAL CL	ASS ITEM NO. 4	CSP C	ode: N/A		
BUSINESS DESCRIPTION	ON: Detached Open-Si	ded Structures (Sheds, Carports, Ca	abanas, Mai	Kiosks)		
DESCRIPTION OF PRE	MISES 1: 301 L	AKE SHORE D	R Car	port 3			
Location Address 301 LAKE SHORE DR WEST PALM BEACH, FL 33		roup I Construct N/A Group I Territory N/A	N/A		Protection Class N/A Coastal Territory Palm Beach - 38	BCEGS Grade N/A No. of Units N/A	
COVERAGES PROVIDE	D Insurance at the I	escribed Prem	ises Applies Only	For Covera	ges For Which A L	imit Of Insuranc	
Coverage	Limit Of	Covered Causes Of Loss	Total Replacement Co	st Rates	Premium	First Loss	
Special Class Item	\$113,000	Wind	\$113,000	Class	\$2,293,00	N/A	
•	******		4 / / O / O / O		FHCF Build-Up Premiur		
OPTIONAL COVERAGE	S Applicable Only \	When Entries A	re Made in The Sci	nedule Belo			
Coverage		mium			eplacement Cost		
_		11		-		ersonal Property	
DEDUCTIBLE							
Other Windstorm or I	Hail Deductible		Year Hurricane ge Deductible		····		
Deductible Percentage (De	eductible Amount)	Deductible Percent	tage (Deductible Amount))			
Bldg: 1% (\$1	1,130)	Bldg: 5	5% (\$5,650)				
WINDSTORM MITIGATION	ON FEATURES						
Terrain C	Year Built 1974	Roof Cover N/A	Roof Deck N/A	•	Roof-Wall onnection N/A	SWR N/A	
Building Type N/A	Roof Shape N/A	Openin	g Protection N/A	FBC Wind N/A	Speed FBC	Wind Design N/A	
*A premium adjustment construction techniques t	of \$ 0.00 is included to that exist. Adjustments	reflect building range from a 1%	code enforcement a	and the build % credit.	ling's wind loss mit	gation features	
Mortgageholder(s) & Ot							
PREMIUM: \$2,493.00	-						
					,		

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Policy Number: 08653714 - 1 Effective Date: 12/31/2022 to 12/31/2023

Insured Name: Lake Harbour Towers South Condominium Association Inc

FLOOD COVERAGE IS NOT PROVIDED BY THIS POLICY.

THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

THIS POLICY CONTAINS A CO-PAY PROVISION THAT MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

TO REPORT A LOSS OR CLAIM CALL 866.411.2742

PLEASE CONTACT YOUR AGENT IF THERE ARE ANY QUESTIONS PERTAINING TO YOUR POLICY. IF YOU ARE UNABLE TO CONTACT YOUR AGENT, YOU MAY REACH CITIZENS AT 866.411.2742.







COMMERCIAL PROPERTY POLICY FORMS AND ENDORSEMENTS SCHEDULE

POLICY NUMBER 0

08653714 - 1

POLICY PERIOD FROM 12/31/2022

TO 12/31/2023

at 12:01 a.m. Eastern Time

Named Insured

Lake Harbour Towers South Condominium Association Inc

		-		e form applies to all items scheduled in the policy
Location No.	Building No.	Form No.	Edition Date	Description
ALL	ALL	CP 00 90	07 88	COMMERCIAL PROPERTY CONDITIONS
ALL	ALL	CIT W00 02	02 22	TABLE OF CONTENTS -CONDOMINIUM ASSOCIATION
ALL	ALL	IL 00 17	11 98	COMMON POLICY CONDITIONS
ALL	ALL	IL P 001	01 04	U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL ("OFAC") ADVISORY NOTICE TO POLICYHOLDERS
ALL	ALL	CIT 03 23	01 14	FLORIDA CALENDAR YEAR HURRICANE PERCENTAGE DEDUCTIBLE (RESIDENTIAL RISKS)
ALL	ALL	CIT W14 20	02 14	CITIZENS CHANGES - PROPERTY NOT COVERED
ALL	ALL	IL 09 35	07 02	EXCLUSION OF CERTAIN COMPUTER- RELATED LOSSES
ALL	ALL	CIT 01 91	01 14	FLORIDA CHANGES - RESIDENTIAL CONDOMINIUM ASSOCIATIONS
ALL	ALL	CP 01 40	07 06	EXCLUSION OF LOSS DUE TO VIRUS OR BACTERIA
ALL	ALL	CIT 01 75	02 20	FLORIDA CHANGES - LEGAL ACTION AGAINST US
ALL	ALL	CIT CRW 01 25	02 22	FLORIDA CHANGES
ALL	ALL	CIT W10 10	02 22	CAUSES OF LOSS - WINDSTORM OR HAIL FORM
ALL	ALL	CIT W02 55	02 19	FLORIDA CHANGES - CANCELLATION AND NONRENEWAL
1	ALL	CP 00 17	06 07	CONDOMINIUM ASSOCIATION COVERAGE FORM

Issued Date: 01/11/2023

First Named Insured Copy

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100001 0-001101 14	includes copyrighted material of moutained Services Office, Inc.,	Page 1 of 1
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	with its parmission.	





COMMERCIAL PROPERTY POLICY POLICY INTEREST SCHEDULE

POLICY NUMBER

08653714 - 1

POLICY PERIOD FROM 12/31/2022

TO 12/31/2023

at 12:01 a.m. Eastern Time

Named Insured

Lake Harbour Towers South Condominium Association Inc

Location No.

Building No.

Interest Type

Name and Mailing Address

No Additional Interests.

Issued Date: 01/11/2023

First Named Insured Copy

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A Stock Company P.O. Box 33003 St. Petersburg, FL 33733-8003 Customer Service: 1-800-820-3242

Claims: 1-800-725-9472

FLOOD DECLARATIONS PAGE

FFL99.001 1021 8137630 1/31/23 2000 11523 FLD RCBP

National Flood Insurance Policy

Policy Number	NFIP Policy Number	Product Type:			
09 1151068024 09	1151068024	Residential Condominium Building Policy Form			

Policy Period	Date of Issue	Agent Code	Prior Policy Number
From: 2/03/23 To: 2/03/24 12:01 am Standard Time	01/31/2023	0087062	1151068024

Agent (561)276-5221 THE PLASTRIDGE AGENCY INC 820 NE 6TH AVE **DELRAY BEACH FL 33483-5735**

LAKE HARBOUR TOWERS S 301 LAKE SHORE DR WEST PALM BEACH FL 33403-3575

DELRAYDOCS@PLASTRIDGE.COM

Property Location (if other than above) 301 LAKE SHORE DR, LAKE PARK FL 33403

Address may have been changed in accordance with USPS standards.

Rating Information

Rate Category: Rating Engine

Primary Residence: N

Building Occupancy: Residential Condominium Building

Building Description: Entire Residential Condo Building

Property Description: Slab on Grade, 8 floors

Flood Risk: AE

First Floor Height: .8 ft

Method Used to Determine First Floor Height: Elevation Certificate

Date of Construction: 01/01/1973

Prior NFIP Claims: Number of Units: 84

Replacement Cost Value: 27,233,510

Coverage		Deductible	Annual Premium
BUILDING CONTENTS	\$21,000,000 \$1,250 \$100,000 \$1,250		\$11,845.00 \$249.00
Your property's NFIP flocan affect your premium contact your insurance	n. For more information	ICC Premium: Community Rating Discount: FULL RISK PREMIUM: DISCOUNTED PREMIUM: Reserve Fund Assessment: Federal Policy Service Fee: HFIAA Surcharge:	\$75.00 \$2,395.00 \$9,774.00 \$9,774.00 \$1,759.00 \$1,780.00 \$250.00

TOTAL WRITTEN PREMIUM AND FEES:

\$13,563.00

THIS IS NOT A BILL

Premium Paid by: Insured

Forms and Endorsements:

FFL 99.310 0120 0120 WFL 99.416 1021 1021 FFL 99.117 1021 1021

This policy is issued by NAIC company 11523 Wright National Flood Insurance Company A stock company Copy Sent To: As indicated on back or additional pages, if any.

Patricia Templeton-Jones, President



FFL99.001 1021 8137630 1/31/23

09 1151068024 09

Agent (561)276-5221 THE PLASTRIDGE AGENCY INC 820 NE 6TH AVE DELRAY BEACH FL 33483-5735

Dear Mortgagee: The Reform Act of 1994 require you to notify the WYO company for this policy within 60 days of any changes in the servicer of this loan.

The above message applies only when there is a mortgagee on the insured location.

Special Provisions:

This policy covers only one building. If you have more than one building on your property, please make sure they are all covered. See III. Property Covered within your Flood policy for the NFIP definition of "building" or contact your agent, broker, or insurance company. Please refer to the policy for complete terms, conditions, and exclusions. A full, digital copy of your flood policy form is available at www.wrightflood.com/policyforms.html. The form which applies to your policy coverage is: Residential Condominium Building Policy Form

For questions about your flood insurance policy rating, contact your agent or insurance company. To learn more about your flood risk please visit FloodSmart.gov/floodcosts.

Claims Information:

Please contact your agent or go to www.wrightflood.com to enter your claim as well as receive important information to mitigate the damage to your property. If you need to reach the insurance company the number is 1-800-725-9472.





Wright National Flood Insurance Company A Stock Company P.O. Box 33003 St. Petersburg, FL 33733-8003 Customer Service: 1-800-820-3242 Claims: 1-800-725-9472

FFL 99.310 0120 8137630 1/31/23

Wright National Flood Insurance Company Privacy Statement

09 1151068024 09 2000 11523 FLD RCBP 2/03/23

Revised: January 1, 2020

This Privacy Statement explains our privacy practices, including how we use your non-public personal information ("Personal Information") and to whom it is disclosed. We may amend this Privacy Statement from time to time consistent with applicable privacy laws.

Wright National Flood Insurance Company and its affiliates, Wright National Flood Insurance Services, LLC, DBA Wright Flood Insurance Services, LLC in California, and Wright National Flood Insurance Services of New York, LLC, member companies of The Wright Insurance Group, LLC, follow the privacy practices described in this Privacy Statement. Depending on the business they perform, these affiliates may also share information as described below.

We may collect Personal Information about you from the following sources:

- Information we receive from you on applications or other forms we receive from you or your authorized representative, such as your name, address, social security number, tax identification number, asset information and income information;
- Information about your transactions with us or the services being performed by, us, our affiliates or others, such as information concerning your policy, premiums, payment history, information about your home or other real property, information from lenders and other third parties involved in such a transaction, account balances, credit card numbers and payment histories;
- Information we receive from you through our internet websites, such as your name, address, email address, Internet Protocol address, the website links you used to get to our site(s) and the pages viewed while at our site(s); and
- Information we receive from consumer or other reporting agencies.

Protection of the Confidentiality and Security of Your Personal Information

We maintain physical, electronic and procedural safeguards designed to protect your Personal Information from unauthorized access or intrusion. We limit access to the Personal Information to those employees who need such access in connection with providing products or services to you or for other legitimate business purposes.

Sharing of Personal Information

We do not disclose Personal Information about our customers or former customers to anyone, except as permitted by law. We do not share information we collect from consumer or credit reporting agencies with our affiliates or others without your consent unless such disclosure is otherwise permitted by law.

Consistent with applicable law, we may nevertheless provide all or some of the Personal Information described above (excluding information we receive from consumer or other credit reporting agencies) to the following individuals and companies:

- to our affiliates, including insurance companies and agents to provide you with services you have requested or as otherwise permitted under applicable law;
- to insurance agents, brokers, representatives, support organizations or others:
 - to the extent necessary to provide you with services you have requested, so long as the above entities and persons agree not
 to further disclose your Personal Information except to the extent necessary to carry out the requested service on your
 behalf;
 - to enable us to detect or prevent criminal activity, fraud, material misrepresentation or nondisclosure in connection with an insurance transaction; and



FFL 99.310 0120 8137630 1/31/23

09 1151068024 09

- in connection with performing an insurance transaction for you;
- to third-party contractors or service providers for the purpose of determining your eligibility for an insurance benefit or payment and/or provide you with services you have requested; and
- to an insurance regulatory authority, or a law enforcement or other governmental authority.

Sharing of Personal Information With Service Providers

We may share some or all of the Personal Information (excluding information we receive from consumer or other credit reporting agencies) that we collect about you with nonaffiliated third parties to provide services or functions on our behalf pursuant to a contractual agreement prohibiting the third party from disclosing or using your Personal Information other than to carry out the purposes for which we disclosed the Personal Information. Such services may include the marketing of financial products or services offered pursuant to agreements between one or more financial institutions.

Right to Opt Out of Information Sharing With Nonaffiliated Parties Other Than As Permitted By Law

Under certain circumstances not applicable here, financial institutions are required to offer consumers the right to "opt out" of the sharing of Personal Information with nonaffiliated parties, when such sharing of Personal Information is not authorized by law. Since we do not share your Personal Information with nonaffiliated third parties except as expressly permitted by law, this notice and "opt out" opportunity does not apply to you.

For Residents of California, New Mexico and Vermont: Your Authorization Is Required Prior To The Sharing of Your Information With Nonaffiliated Third Parties Other Than As Permitted By Law

Under certain circumstances not applicable here, financial institutions are required to obtain your authorization ("opt in") prior to sharing your Personal Information with nonaffiliated third parties, when such sharing of Personal Information is not authorized by law. Since we do not share your Personal Information with nonaffiliated third parties except as expressly permitted by law, this notice and "opt in" opportunity does not apply to you.

Right to Access Your Personal Information and Ability To Correct Errors Or Request Changes Or Deletion

As required by applicable law, we will afford you the right to access your Personal Information, under certain circumstances to find out to whom your Personal Information has been disclosed, and request correction or deletion of your Personal Information. Where permitted by law, we may charge a reasonable fee to cover the costs incurred in responding to such requests. All requests must be made in writing to the following address:

Privacy Compliance Officer
Wright National Flood Insurance Company
801 94th Avenue North - Suite 110
St. Petersburg, FL 33702

Compliance@weareflood.com 1-800-820-3242, ext 7777

