

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 9/10/2025

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.

PRODUCER Higginbotham Insurance Agency, Inc.		CONTACT NAME: PHONE				
3939 Tampa Road Oldsmar FL 34677		E-MAIL ADDRESS:	MOxiner@higginbotham.net			
		PRODUCER CUSTOMER II	D: VINEOFT-01			
	License#: 2081754		INSURER(S) AFFORDING CO	VERAGE	NAIC#	
INSURED		INSURER A :	Underwriters At Lloyd's, Lond	don	15642	
Vineyard Of Tampa Condominium Association, Inc c/o Ameri-Tech Community Management, Inc		INSURER B :	INSURER B: Philadelphia Indemnity Insurance Company			
24701 US Highway 19 N		INSURER C :	Great American E & S Insura	nce Company	37532	
Suite 102		INSURER D: Atlantic Specialty Insurance Company			27154	
Clearwater FL 33763-5008		INSURER E :				
		INSURER F :				

COVERAGES CERTIFICATE NUMBER: 1512545847 REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required) SEE ATTACHED - 45 Units

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 INSURANC		SURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)		COVERED PROPERTY	LIMITS
Α	Х	PROPERTY		AQS-251903	6/30/2025	6/30/2026	Х	BUILDING	\$ SEE ATTACHED		
	CAL	JSES OF LOSS	DEDUCTIBLES					PERSONAL PROPERTY	\$		
		BASIC	BUILDING					BUSINESS INCOME	\$		
		BROAD	10,000 CONTENTS	_				EXTRA EXPENSE	\$		
	Х	SPECIAL]					RENTAL VALUE	\$		
		EARTHQUAKE						BLANKET BUILDING	\$		
	Х	WIND	50,000					BLANKET PERS PROP	\$		
		FLOOD						BLANKET BLDG & PP	\$		
	Х	NS	5% per bldg				Х	RCV	\$		
									\$		
		INLAND MARINE		TYPE OF POLICY					\$		
	CAL	JSES OF LOSS							\$		
		NAMED PERILS		POLICY NUMBER					\$		
									\$		
В	Х	CRIME		PCAC024200-0125	6/30/2025	6/30/2026	Х	Limit	\$ 200,000		
	TYF	PE OF POLICY					Х	Deductible	\$ 250		
	Em	ployee Dishonesty							\$		
		BOILER & MACH							\$		
		EQUIPMENT BR	EAKDOWN					1	\$		
C	Gen	eral Liability		PL F053449-02	6/30/2025	6/30/2026	Х	Aggregate	\$2,000,000		
D	Dire	ciois a Officers		MML36384-0625	6/30/2025	6/30/2026	Х	Limit	\$1,000,000		

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Property Deductibles: \$10,000 All Other Perils Per Occurrence; \$50,000 All Other Wind/Hail Per Occurrence; 5% per Total Insurable Values per building reported on the Schedule of Values, subject to \$100,000 minimum Per Occurrence respects Named Storm; 5% per Total Insurable Values per building reported on the Schedule of Values, subject to \$100,000 minimum Per Occurrence respects Wind Driven Precipitation.

Ordinance or Law: A included, B & C \$500,000 combined See Attached...

CERTIFICATE HOLDER	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.
For Information Only	AUTHORIZED REPRESENTATIVE

Δ	GENCY	CUSTOMER	ın.	VINFOFT-0	1
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LOC #:

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ACORD ®	

ADDITIONAL REMARKS SCHEDULE

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AGENCY Higginbotham Insurance Agency, Inc. POLICY NUMBER		NAMED INSURED Vineyard Of Tampa Condominium Association, Inc c/o Ameri-Tech Community Management, Inc				
		24701 US Highway 19 N Suite 102 Clearwater FL 33763-5008				
CARRIER	NAIC CODE					
		EFFECTIVE DATE:				
ADDITIONAL REMARKS						

ADDITIONAL REMARKS				
THIS ADDITIONAL REMARKS	FORM IS A SCHEDULE TO ACORD FORM,			
FORM NUMBER: 24	FORM TITLE: CERTIFICATE OF PROPERTY INSURANCE			
SPECIAL CONDITIONS:				
D - Directors & Officers (Claims I	Made): MML36384-0625 Pending and Prior Date 06/30/2017			

Vineyard of Tampa Condominium Association, Inc

City	State	Zip	Limit
Tampa	FL	33609	\$2,862,458
Tampa	FL	33609	\$518,570
Tampa	FL	33609	\$523,343
Tampa	FL	33609	\$594,771
Tampa	FL	33609	\$401,294
Tampa	FL	33609	\$349,490
Tampa	FL	33609	\$264,483
Tampa	FL	33609	\$277,137
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