

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/03/2026

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Services, LLC 2502 N Rocky Point Drive Suite 400 Tampa, FL 33607	CONTACT NAME: West Coast Condo PHONE (A/C, No, Ext): FAX (A/C, No): 813 321-7525 E-MAIL ADDRESS: westcoastcondo@usi.com														
INSURED Royal Pines Condominium Association Inc c/o Ameri-Tech Realty, Inc. 24701 US Highway 19 N, Suite102 Clearwater, FL 33763	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Superior Specialty Insurance Company</td> <td>16551</td> </tr> <tr> <td>INSURER B : Midvale Indemnity Company</td> <td>27138</td> </tr> <tr> <td>INSURER C : Slide Insurance Company</td> <td>17227</td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Superior Specialty Insurance Company	16551	INSURER B : Midvale Indemnity Company	27138	INSURER C : Slide Insurance Company	17227	INSURER D :		INSURER E :		INSURER F :	
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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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY CLAIMS-MADE ☒ OCCUR ☒ Includes Separation of Insureds GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC OTHER:			TLUCAP50306601	05/31/2026	05/31/2027	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$50,000 MED EXP (Any one person) \$5,000 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 ☒ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS NON-OWNED AUTOS ONLY			TLUCAP50306601	05/31/2026	05/31/2027	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	☒ UMBRELLA LIAB ☒ EXCESS LIAB ☐ DED ☐ RETENTION \$			PRP229824000018736	05/31/2026	05/31/2027	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ Y / N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N / A				☐ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Crime			TLUCAP50306601	05/31/2026	05/31/2027	\$250,000
A	D&O			TLUCAP50306601	05/31/2026	05/31/2027	\$1,000,000/ \$2,500 ded
C	Property			CPFL000167600	05/31/2026	05/31/2027	Refer to Description

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

Property Address: 4500 A East Bay Drive, Largo, FL 33764

Property Coverage Including Wind

Replacement Cost / Special Form / Agreed Amount

Hurricane Deductible 5% Calendar Year

All Other Perils Deductible \$10,000

(See Attached Descriptions)

CERTIFICATE HOLDER

CANCELLATION

Ameri-Tech Community Management
 24701 US Highway 19 North
 Suite 102
 Clearwater, FL 33763

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



DESCRIPTIONS (Continued from Page 1)

Equipment Breakdown Included

Ordinance or Law A Included, B&C Combined \$204,567

Limits:

Building A - Units 101-116 - Limit: \$2,125,345 (16 units)

Building B - Units 117-128 - Limit: \$1,793,134 (12 units)

Building J - Units 129-144 - Limit: \$2,000,456 (16 units)

Building K - Units 145-156 - Limit: \$1,724,297 (12 units)

Clubhouse - Limit: \$539,492/ Contents: \$20,000

Carports - \$269,600

Swimming Pool - \$165,036

Outdoor Property - \$79,580

Total Insured Value: \$8,716,940

Property Management Company, Directors and Trustees and Non-Compensated Officers are included on the Crime and Directors & Officers Policies