To report a claim call: (800) 759-8656

Harleysville Mutual Insurance Company

Harleysville, PA 19438-2297 www.harleysvillegroup.com

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 9/15/2008 to 9/15/2009

These Declarations are effective as of: 9/15/2008 at 12:01 AM

INSURED NAME & ADDRESS

MISTY OAKS CONDO ASSN C/O LION PROPERTY MGMT PO BOX 8463 CORAL SPRINGS, FL 33075-8463

PRODUCER NAME & MAILING ADDRESS PRODUCER#: 07540-00103-000 GATEWAY INSURANCE AGENCY LLC PO BOX 5648 FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS 4100 CARRIAGE DR BLDG G POMPANO BEACH, FL 33069-5502

COMMUNITY NAME POMPANO BEACH, CITY OF COMMUNITY NUMBER 1200550000F

POLICY TERM: One Year

BUILDING DESCRIPTION

Other Residential Two Floors No Basement Low Rise 5 Units

Rates: .210/ .080

Coverage Limitations May Apply, Refer CONTENTS LOCATION to your Standard Flood Insurance

Policy for details.

N/A

Estimated Replacement Cost: \$501,000

PROGRAM

Regular

FLOOD ZONE

AHB

CONSTRUCTION Post-Firm

Construction

COVERAGE & RATING INFORMATION

BUILDING

CONTENTS

PREMIUM PAID

Coverage: Deductible: \$1,250,000 \$5,000

Coverage: Deductible: N/A Rates:

N/A N/A

Premium Subtotal: Previous Premium Subtotal: ICC Premium:

CRS Discount: Expense Constant: Federal Policy Fee:

Endorsement Amount:

\$117.00 \$.00 \$175.00 \$.00

\$1,166.00

\$.00

\$6.00

Total Premium:

\$1,230.00

FIRST MORTGAGEE

SECOND MORTGAGEE

POLICY #: 36620176182008

Harleysville Mutual Insurance Company

Harleysville, PA 19438-2297 www.harleysvillegroup.com

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 9/15/2008 to 9/15/2009

These Declarations are effective as of: 9/15/2008 at 12:01 AM

INSURED NAME & ADDRESS

հովհումեվիակավովոկվությելնում հումեակ

MISTY OAKS CONDO ASSN C/O LION PROPERTY MGMT PO BOX 8463 CORAL SPRINGS, FL 33075-8463 PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 07540-00103-000 GATEWAY INSURANCE AGENCY LLC PO BOX 5648 FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS 4101 CARRIAGE DR BLDG F POMPANO BEACH, FL 33069-5530 COMMUNITY NAME POMPANO BEACH, CITY OF COMMUNITY NUMBER 1200550000F

POLICY TERM: One Year

BUILDING DESCRIPTION Other Residential Two Floors

No Basement Low Rise 8 Units Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

CONTENTS LOCATION N/A

Estimated Replacement Cost: \$744,900

PROGRAM Regular FLOOD ZONE AHB

CONSTRUCTION Post-Firm Construction

COVERAGE & RATING INFORMATION

BUILDING

.210/ .080

CONTENTS

PREMIUM PAID

Coverage: Deductible:

Rates:

\$2,000,000 \$5,000

Coverage: Deductible: N/A Rates: N/A

Premium Subtotal: \$1,866.00 Previous Premium Subtotal: ICC Premium: \$6.00 CRS Discount: \$187.00 Expense Constant: \$175.00 Federal Policy Fee:

Endorsement Amount:

SECOND MORTGAGEE

Total Premium:

\$1,860.00

\$.00

\$.00

\$.00

FIRST MORTGAGEE

To report a claim call: (800) 759-8656

Harleysville Mutual Insurance Company

Harleysville, PA 19438-2297 www.harleysvillegroup.com

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 9/15/2008 to 9/15/2009

These Declarations are effective as of: 9/15/2008 at 12:01 AM

INSURED NAME & ADDRESS

lallmildindorbildidabiladilmillidimilliobil

MISTY OAKS CONDO ASSN C/O LION PROPERTY MGMT PO BOX 8463 CORAL SPRINGS, FL 33075-8463 PRODUCER NAME & MAILING ADDRESS PRODUCER#: 07540-00103-000

GATEWAY INSURANCE AGENCY LLC PO BOX 5648 FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS 4103 CARRIAGE DR BLDG H POMPANO BEACH, PL 33069-5538 COMMUNITY NAME

COMMUNITY NUMBER POMPANO BEACH, CITY OF 1200550000F

POLICY TERM: One Year

BUILDING DESCRIPTION

2-4 Family Two Floors No Basement Low Rise 4 Units Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

CONTENTS LOCATION N/A

Estimated Replacement Cost: \$450,600

PROGRAM

Regular

FLOOD ZONE

AHB

CONSTRUCTION

COVERAGE & RATING INFORMATION

Post-Firm Construction

BUILDING

.210/ .080

N/A Coverage:

CONTENTS

PREMIUM PAID

Coverage: Deductible:

Rates:

\$1,000,000 \$5,000

Deductible: N/A Rates:

Premium Subtotal: Previous Premium Subtotal: ICC Premium: CRS Discount:

Expense Constant: Federal Policy Fee: Endorsement Amount:

\$.00 \$70.00 \$.00

\$848.00

\$.00

\$6.00

\$85.00

FIRST MORTGAGEE

SECOND MORTGAGEE

Total Premium: \$839.00

Processed by: Flood Insurance Processing Center P.O. Box 2057 Kalispell MT 59903-2057

To report a claim call: (800) 759-8656

Harleysville Mutual Insurance Company

Harleysville, PA 19438-2297 www.harleysvillegroup.com

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 9/15/2008 to 9/15/2009

These Declarations are effective as of: 9/15/2008 at 12:01 AM

INSURED NAME & ADDRESS

MISTY OAKS CONDO ASSN % MWI C/O LION PROPERTY MGMT PO BOX 8463 CORAL SPRINGS, FL 33075-8463 PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 07540-00103-000 GATEWAY INSURANCE AGENCY LLC PO BOX 5648 FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS 4104 CARRIAGE DR BLDG D POMPANO BEACH, FL 33069-5532 COMMUNITY NAME POMPANO BEACH, CITY OF COMMUNITY NUMBER 1200550000F

POLICY TERM: One Year

BUILDING DESCRIPTION

2-4 Family Two Floors No Basement Low Rise 4 Units Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

CONTENTS LOCATION

N/A

Estimated Replacement Cost: \$1,088,845

PROGRAM

Regular

FLOOD ZONE

AHB

CONSTRUCTION

BUILDING

Post-Firm

Construction

COVERAGE & RATING INFORMATION

CONTENTS

PREMIUM PAID

Coverage: Deductible: \$1,000,000 \$5,000

N/A Coverage: Deductible: N/A

Premium Subtotal: Previous Premium Subtotal: ICC Premium: CRS Discount: \$848.00 \$.00 \$6.00 \$85.00

FIRST MORTGAGEE

Rates: .210/ .080

Rates:

Expense Constant: Federal Policy Fee: Endorsement Amount:

\$.00 \$70.00 \$.00

Total Premium: SECOND MORTGAGEE

\$839.00

POLICY #: 36620176212008

Harlevsville Mutual Insurance Company

Harleysville, PA 19438-2297 www.harleysvillegroup.com

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 9/15/2008 to 9/15/2009

These Declarations are effective as of: 9/15/2008 at 12:01 AM

INSURED NAME & ADDRESS

MISTY OAKS CONDO ASSN % MWI C/O LION PROPERTY MGMT PO BOX 8463 CORAL SPRINGS, FL 33075-8463 PRODUCER NAME & MAILING ADDRESS PRODUCER#: 07540-00103-000

GATEWAY INSURANCE AGENCY LLC PO BOX 5648

FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS 4105 CARRIAGE DR BLDG J POMPANO BEACH, FL 33069-5539 COMMUNITY NAME

POMPANO BEACH, CITY OF

COMMUNITY NUMBER 1200550000F

POLICY TERM: One Year

BUILDING DESCRIPTION

2-4 Family Two Floors No Basement 4 Units Low Rise

Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

CONTENTS LOCATION N/A

Estimated Replacement Cost: \$1,106,422

PROGRAM

Regular

FLOOD ZONE

AHB

CONSTRUCTION Post-Firm Construction

COVERAGE & RATING INFORMATION

BUILDING

N/A Coverage:

CONTENTS

PREMIUM PAID

Coverage: Deductible: \$1,000,000 \$5,000

Deductible: N/A N/A

Premium Subtotal: Previous Premium Subtotal: ICC Premium:

\$848.00 \$.00 \$6.00 \$85.00 \$.00

Rates:

.210/ .080

Rates:

CRS Discount: Expense Constant: Federal Policy Fee: Endorsement Amount:

\$70.00 \$.00

FIRST MORTGAGEE

Total Premium: SECOND MORTGAGEE

\$839.00

Harlevsville Mutual Insurance Company

Harleysville, PA 19438-2297 www.harleysvillegroup.com

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 9/15/2008 to 9/15/2009

These Declarations are effective as of: 9/15/2008 at 12:01 AM

INSURED NAME & ADDRESS

الباسال الساليل السياليات المانا بالساليات الساليات الساليات

MISTY OAKS CONDO ASSN C/O LION PROPERTY MGMT PO BOX 8463 CORAL SPRINGS, FL 33075-8463

PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 07540-00103-000 GATEWAY INSURANCE AGENCY LLC PO BOX 5648 FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS 4106 CARRIAGE DR BLDG C POMPANO BEACH, FL 33069-5541 COMMUNITY NAME

POMPANO BEACH, CITY OF

COMMUNITY NUMBER 1200550000F

POLICY TERM: One Year

BUILDING DESCRIPTION Other Residential Two Floors No Basement

Low Rise 5 Units

Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

N/A

CONTENTS LOCATION N/A

Estimated Replacement Cost: \$1,298,137

PROGRAM Regular

FLOOD ZONE AHB

CONSTRUCTION Post-Firm Construction

COVERAGE & RATING INFORMATION

BUILDING

.210/ .080

CONTENTS

PREMIUM PAID

Coverage: Deductible:

Rates:

\$1,250,000 \$5,000

Coverage: Deductible: N/A

Rates:

Premium Subtotal: Previous Premium Subtotal:

ICC Premium: CRS Discount: \$117.00 Expense Constant: Federal Policy Fae: ¥175,00 Endorsement Amount:

Total Premium:

\$1,230.00

\$1,166.00

\$.00

\$.00

\$.00

\$6.00

FIRST MORTGAGEE

OXP

SECOND MORTGAGEE

Processed by: Flood Insurance Processing Center P.O. Box 2057 Kalispell MT 59903-2057

To report a claim call: (800) 759-8656

Harlevsville Mutual Insurance Company

Harleysville, PA 19438-2297 www.harleysvillegroup.com

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 9/15/2008 to 9/15/2009

These Declarations are effective as of: 9/15/2008 at 12:01 AM

INSURED NAME & ADDRESS

MISTY OAKS CONDO ASSN % MWI C/O LION PROPERTY MGMT PO BOX 8463 CORAL SPRINGS, FL 33075-8463

PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 07540-00103-000 GATEWAY INSURANCE AGENCY LLC PO BOX 5648 FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS 4107 CARRIAGE DR BLDG K POMPANO BEACH, FL 33069-5540 COMMUNITY NAME POMPANO BEACH, CITY OF COMMUNITY NUMBER 1200550000F

POLICY TERM: One Year

BUILDING DESCRIPTION

2-4 Family Two Floors No Basement 4 Units Low Rise

Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

CONTENTS LOCATION N/A

Estimated Replacement Cost: \$1,093,518

PROGRAM

Coverage: Deductible:

Regular

FLOOD ZONE

AHB

N/A

N/A

CONSTRUCTION Post-Firm Construction

COVERAGE & RATING INFORMATION

BUILDING

\$1,000,000 \$5,000

.210/ .080

Coverage: Deductible: N/A

Rates:

CONTENTS

PREMIUM PAID

Premium Subtotal: \$848.00 Previous Premium Subtotal: ICC Premium: CRS Discount:

\$85.00 Expense Constant: \$.00 Federal Policy Fee: \$70.00 Endorsement Amount: \$.00

SECOND MORTGAGEE

Total Premium:

\$839.00

\$.00

\$5.00

FIRST MORTGAGEE

Rates.

To report a claim call: (800) 759-8656

Harleysville Mutual Insurance Company

Harleysville, PA 19438-2297 www.harleysvillegroup.com

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 9/15/2008 to 9/15/2009

These Declarations are effective as of: 9/15/2008 at 12:01 AM

INSURED NAME & ADDRESS

MISTY OAKS CONDO ASSN C/O LION PROPERTY MGMT PO BOX 8463 CORAL SPRINGS, FL 33075-8463 PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 07540-00103-000 GATEWAY INSURANCE AGENCY LLC PO BOX 5648 FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS 4109 CARRIAGE DR BLDG L POMPANO BEACH, FL 33069-5534 COMMUNITY NAME

POMPANO BEACH, CITY OF

COMMUNITY NUMBER 1200550000F

POLICY TERM: One Year

BUILDING DESCRIPTION

Other Residential Two Floors No Basement Low Rise 5 Units Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

CONTENTS LOCATION

N/A

Estimated Replacement Cost: \$1,355,882

PROGRAM

Coverage: Deductible:

Rates:

FIRST MORTGAGEE

Regular

FLOOD ZONE

AHB

N/A

N/A

CONSTRUCTION Post-Firm Construction

COVERAGE & RATING INFORMATION

.210/ .080

BUILDING

\$1,250,000

\$5,000

Rates:

Coverage:

Deductible: N/A

CONTENTS

PREMITIM PATO

Premium Subtotal:

\$1,166.00 Previous Premium Subtotal: \$.00 ICC Premium: \$6.00 CRS Discount: \$117.00 \$.00

Expense Constant: \$175.00 Federal Policy Fee: Endorsement Amount: \$.00

Total Premium:

\$1,230.00

SECOND MORTGAGEE

To report a claim call: (800) 759-8656

Harleysville Mutual Insurance Company

Harleysville, PA 19438-2297 www.harleysvillegroup.com

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 9/15/2008 to 9/15/2009

These Declarations are effective as of: 9/15/2008 at 12:01 AM

INSURED NAME & ADDRESS

الماسال السالياليا الماساليا الماسال الساليا الساليا الساليا

MISTY OAKS CONDO ASSN C/O LION PROPERTY MGMT PO BOX 8463 CORAL SPRINGS, FL 33075-8463

PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 07540-00103-000 GATEWAY INSURANCE AGENCY LLC PO BOX 5648 FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS 4111 CARRIAGE DR BLDG M POMPANO BEACH, FL 33069-5533 COMMUNITY NAME POMPANO BEACH, CITY OF COMMUNITY NUMBER 1200550000F

POLICY TERM: One Year

BUILDING DESCRIPTION Other Residential Two Floors

No Basement Low Rise 5 Units Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

CONTENTS LOCATION

N/A

Estimated Replacement Cost: \$1,285,795

PROGRAM Regular FLOOD ZONE AHR

CONSTRUCTION Post-Firm Construction

COVERAGE & RATING INFORMATION

.210/ .080

BUILDING

CONTENTS

PREMIUM PAID

Coverage: Deductible:

Rates:

\$1,250,000 \$5,000

Coverage: Deductible: N/A Rates:

N/A N/A

Premium Subtotal: Previous Premium Subtotal: ICC Premium: CRS Discount:

\$6.00 \$117.00 Expense Constant: \$.00 Federal Policy Fee: \$175.00 Endorsement Amount: \$.00

FIRST MORTGAGEE

Total Premium: SECOND MORTGAGEE

\$1,230.00

\$1,166.00

\$.00



POLICY #: 87029902852008

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 3/27/2008 to 3/27/2009

These Declarations are effective as of: 3/27/2008 at 12:01 AM

INSURED NAME & ADDRESS

<u>հահավահանահահանանուհ կառիսինումիա</u>

MISTY OAKS CONDO ASSN INC C/O LION PROPERTY MANAGEMENT PO BOX 8463 CORAL SPRINGS, FL 33075-8463

PRODUCER NAME & MAILING ADDRESS PRODUCER#: 06840-00040-000 GATEWAY INSURANCE AGENCY LLC

PO BOX 5648

FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS CONDO ASSN 4113 CARRIAGE DR

POMPANO BEACH, FL 33069-5542

COMMUNITY NAME POMPANO BEACH, CITY OF COMMUNITY NUMBER 1200550206F

POLICY TERM: One Year

BUILDING DESCRIPTION

2-4 Family Two Floors No Basement 4 Units Low Rise

Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

CONTENTS LOCATION N/A

Estimated Replacement Cost: \$1,000,000

PROGRAM

Deductible:

Rates:

Regular

FLOOD ZONE AHB

CONSTRUCTION Post-Firm

Construction

COVERAGE & RATING INFORMATION

.190/ .080

CONTENTS

BUILDING

\$1,000,000 \$500

N/A Coverage: Deductible: N/A

Rates: N/A PREMIUM PAID

Premium Subtotal: Previous Premium Subtotal: ICC Premium:

\$.00 \$6.00 CRS Discount: \$103.00 Expense Constant: \$.00 \$60.00

Federal Policy Fee: Endorsement Amount:

\$983.00

\$.00

\$1,020.00

Total Premium: SECOND MORTGAGEE

FIRST MORTGAGEE

SUNTRUST BANK SF 501 E LAS OLAS BLVD

FORT LAUDERDALE, FL 33301

Loan#: 6074270

This Declarations Page, in conjuncion with the policy, constitutes your Flood Insurance Policy. IN WITNESS WHEREOF, we have signed this policy below and hereby efter into this Insurance Agreement.

President

Secretary American Strategic Insurance

INSURED COPY

2/29/2008

1R*



FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY #: 87029902932008

POLICY PERIOD: 3/27/2008 to 3/27/2009

These Declarations are effective as of: 3/27/2008 at 12:01 AM

INSURED NAME & ADDRESS

البالسالياليم السالياليا والمامليا بالساليياليينا

MISTY OAKS CONDO ASSN INC C/O LIONS PROPERTY MANAGEMENT PO BOX 8463 CORAL SPRINGS, FL 33075-8463

PRODUCER NAME & MAILING ADDRESS PRODUCER#: 06840-00040-000 GATEWAY INSURANCE AGENCY LLC

PO BOX 5648 FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS

CONDO ASSN 4115 CARRIAGE DR POMPANO BEACH, FL 33069-5543 COMMINITTY NAME

POMPANO BEACH, CITY OF

COMMUNITY NUMBER 1200550206F

POLICY TERM: One Year

BUILDING DESCRIPTION Other Residential

Two Floors No Basement 5 Units Low Rise

Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

CONTENTS LOCATION

N/A

Estimated Replacement Cost: \$1,250,000

PROGRAM

Coverage:

Deductible:

Rates:

Regular

FLOOD ZONE AHB

CONSTRUCTION Post-Firm Construction

COVERAGE & RATING INFORMATION BUILDING

.190/ .080

\$1,250,000

\$500

Coverage: Deductible: N/A

Rates:

N/A

N/A

PREMIUM PAID

CONTENTS

Premium Subtotal: Previous Premium Subtotal: ICC Premium:

\$1,275.00 \$.00 \$6.00 \$128.00

Federal Policy Fee: Endorsement Amount:

CRS Discount: Expense Constant: \$.00 \$150.00 \$.00

Total Premium:

\$1,303.00

SECOND MORTGAGEE

FIRST MORTGAGEE SUNTRUST BANK FA

501 E LAS OLAS BLVD FORT LAUDERDALE, FL 33301

Loan#: 6074270

This Declarations Page, in conjuncton with the policy, constitutes your Flood Insurance Policy. IN WITNESS WHEREOF, we have signed this policy below and hereby efter into this Insurance Agreement.

INSURED COPY 2/29/2008

1R*

American Strategic Insurance

Harleysville Mutual Insurance Company

Harleysville, PA 19438-2297 www.harleysvillegroup.com

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 9/15/2008 to 9/15/2009

These Declarations are effective as of: 9/15/2008 at 12:01 AM

INSURED NAME & ADDRESS

البران الطاني الطاني الطبيان الطباط الطبار المراجع الطالب المراط

MISTY OAKS CONDO ASSN % MWI LION PROPERTY MGMT PO BOX 8463 CORAL SPRINGS, FL 33075-8463 PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 07540-00103-000 GATEWAY INSURANCE AGENCY LLC PO BOX 5648 FORT LAUDERDALE, FL 33310-5648

PHONE# (954)735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS 4117 CARRIAGE DR BLDG B POMPANO BEACH, FL 33069

COMMUNITY NAME

POMPANO BEACH, CITY OF

COMMUNITY NUMBER 1200550000F

POLICY TERM: One Year

BUILDING DESCRIPTION

2-4 Family Two Floors No Basement Low Rise 4 Units Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

CONTENTS LOCATION

N/A

Estimated Replacement Cost: \$1,000,000

PROGRAM

Regular

Rates:

FLOOD ZONE

AHB

CONSTRUCTION

Post-Firm Construction

COVERAGE & RATING INFORMATION

BUILDING

.210/ .080

CONTENTS

PREMIUM PAID

Coverage: Deductible: \$1,000,000 \$5,000

Coverage: N/A Deductible: N/A

Rates:

N/A

Premium Subtotal: Previous Premium Subtotal:

\$.00 ICC Premium: \$6.00 CRS Discount: \$85.00 Expense Constant: \$.00 Federal Policy Fee: \$70.00

Endorsement Amount: \$.00 Total Premium: \$839.00

\$848.00

FIRST MORTGAGEE

SECOND MORTGAGEE

P.O. Box 2057 Kalispell MT 59903-2057 To report a claim call: (800) 759-8656

Harleysville Mutual Insurance Company

Harleysville, PA 19438-2297 www.harleysvillegroup.com

FLOOD POLICY DECLARATIONS

Policy Renewal

TYPE: CONDO

POLICY PERIOD: 9/15/2008 to 9/15/2009

These Declarations are effective as of: 9/15/2008 at 12:01 AM

INSURED NAME & ADDRESS

الباسلام المالينا المساليا والمارا والمارا والمالين المالين المالين

MISTY OAKS CONDO ASSN % MWI C/O LIONS PROPERTY MGMT PO BOX 8463 CORAL SPRINGS, FL 33075-8463 PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 07540-00103-000 GATEWAY INSURANCE AGENCY LLC PO BOX 5648 FORT LAUDERDALE, FL 33310-5648

PHONE# (954) 735-5500

POLICY INFORMATION

PREMIUM PAYOR: Insured

INSURED PROPERTY ADDRESS 4119 W PALM AIRE DR BLDG A POMPANO BEACH, FL 33069-4182 COMMUNITY NAME

POMPANO BEACH, CITY OF

COMMUNITY NUMBER 1200550000F

POLICY TERM: One Year

BUILDING DESCRIPTION

2-4 Family Two Floors No Basement Low Rise 4 Units Coverage Limitations May Apply, Refer to your Standard Flood Insurance Policy for details.

CONTENTS LOCATION N/A

Estimated Replacement Cost: \$1,106,240

PROGRAM

Regular

FLOOD ZONE

AHB

CONSTRUCTION Post-Firm

\$1,000,000

\$5,000

CONTENTS

Construction

COVERAGE & RATING INFORMATION BUILDING

Coverage:

N/A Deductible: N/A

PREMIUM PAID

Premium Subtotal: Previous Premium Subtotal: ICC Premium:

\$848.00 \$.00 \$6.00 \$85.00

FIRST MORTGAGEE

Coverage: Deductible:

Rates: .210/ .080

Rates:

N/A

CRS Discount: Expense Constant: Federal Policy Pee: Endorsement Amount:

\$.00 \$70.00 \$.00

Total Premium: SECOND MORTGAGEE

\$839.00