

*Winds of Paradise Owners Association*  
*c/o: Prestige Property Management of Brevard, LLC*  
*Post Office Box 507*  
*Cape Canaveral, FL 32920*  
*(321) 501-0654*  
[prestigeofbrevard@att.net](mailto:prestigeofbrevard@att.net)

August 16, 2023

TO: ALL HOMEOWNERS  
FROM: BOARD OF DIRECTORS/MANAGEMENT

Dear Homeowner;

Our community has been hit, as most Floridians have been or will be, with huge increases in our insurance rates. A quick search on Google will provide you with lots of information on the current insurance crisis in our state. In addition, our appraisal for replacement cost had to be updated this year at the request of the insurance agency. That appraisal showed our real property total insurable value went from \$7,265,116 to \$10,364,110. Our insurance last year was \$75,379.89 and now has skyrocketed to \$153,880.00 for this year. Our premium is now double what we paid last year, creating a serious shortfall.

The board has spoken extensively with our insurance agent who attended the board meeting on 8/10/23. Due to the way insurance renewals are only released until just weeks before they are due, we have very little time to organize how to pay for this unexpected deficit, as we are required to insure the property at 100% replacement value.

As such, the board is requesting owner permission to utilize Thirty Thousand Dollars (\$30,000.00) currently held in our reserves account on a temporary basis to make the mandatory down payment that is due no later than August 18, 2023. A special meeting of the Membership is scheduled for Wednesday, August 30, 2023, at 6:00 p.m. for this member vote (we must notice the meeting 14 days in advance). A Board Meeting will follow to pass a special assessment to repay the reserves and have enough to cover the increase in monthly premiums until the end of the year. **The Assessment will be \$1,424.00 per unit assuming we get the votes to use reserves and will be due 45 days after the date of the meeting, or no later than October 14, 2023.** The only other option the Board will have is to "finance" the premiums and be charged 8.350%, or costing the association an additional \$5,864.77. This option will still entail the need for a special assessment to handle the shortfall for the remaining months of this year and the interest due each month. This will also create an additional added cost to our increased monthly dues for next year.

**\*\*\*Attached please find the proxy to vote to allow the board to utilize those reserve funds and approve the special assessment to repay the Reserves and cover the budget deficit through 2023. As time is of the essence, please return this by NOON this Friday 8/18/23---yes in 3 days. We need to know we have 19 affirmative votes to use reserves or we will have to go the financed route and incur the extra costs. You may EMAIL this to Lori at [prestigeofbrevard@att.net](mailto:prestigeofbrevard@att.net) to ensure the fastest receipt. If you have any issues scanning it, take a photo and email that.**

**After** you send the photo, you can drop your proxy in the clubhouse mailbox or mail it to Lori at the Prestige address above.

As our insurance agent stated at the board meeting, due to the condition of our buildings, we are able to be reinsured. Some communities are being refused due to their condition. Additionally, please understand that the market to obtain insurance has dwindled significantly these past 2 years with no less than a dozen companies pulling out of the state.

In closing, should you have any questions regarding this notice, please contact Lori at [prestigeofbrevard@att.net](mailto:prestigeofbrevard@att.net) and **please remember to QUICKLY return your proxy!**

We appreciate your understanding of this very difficult position the Board is in concerning this matter. We are bound by the governing documents and required to insure the property at its full replacement value and we have no other manner in which to pay the premiums.

The amount of the Special Assessment has been determined by the following factors:

	\$42,427.00	- down payment required to Frontline Insurance
	\$ 6,325.00	- additional policies paid upfront
	<u>\$ 35,052.00</u>	- Oct. Nov. & Dec. payments of \$11,684 each
	\$ 83,804.00	-Total needed for insurance up to Dec. 31, 2023
Less -	<u>\$ 31,125.00</u>	Already budgeted for this year at \$6225 per month for August-Dec. (5 months)
	<b>\$ 52,679.00</b>	<b>divided by 37 units = \$1423.75 - rounded to \$1,424.00</b>

Sincerely,

Lori Barrella  
For the Board

Enclosures:  
Insurance proposal  
Comparison from last renewal  
10 payment plan  
Financed Option  
Current Assets  
Meeting Notices (2)

(Both appraisals are on our website.)

**LIMITED PROXY**

The undersigned hereby appoints: (**Check one**)

\_\_\_\_ Vice-President, on behalf of the Board of Directors, **OR**

\_\_\_\_ b) \_\_\_\_\_ (if you check **b**, **write in** the name of your Proxy)  
\*section 1

as my/our Proxy,\* with full powers of substitution, for and in the names, place and stead of the undersigned, to appear, represent and cast votes upon any matters on behalf of the undersigned at the **Special Meeting of Winds of Paradise Homeowners Association Members** to be held at **6:00 P.M.**, on **Wednesday, August 30, 2023** in the clubhouse located at Winds of Paradise HOA & by ZOOM and any adjournment thereof. This shall be a general Proxy to establish a quorum, with the exception of the items listed below.

**Statutory Limited Powers:** Pursuant to F.S. 720.306(8)a, I hereby specifically instruct my Proxy to cast my vote in reference to the following matters as instructed:

1. Are you in favor of using the Reserves for the purpose of paying your insurance premium deficit as outlined in the cover letter?

**YES**  **NO**

2. Are you in favor of the Special Assessment to be levied in the amount of \$1,424.00 per unit to repay the Reserves as above and to cover the difference in 2023 Budget Deficit for the monthly premium payments?

**YES**  **NO**

Dated: \_\_\_\_\_, 20\_\_.

Winds of Paradise Address: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Designated Voter)

\_\_\_\_\_  
(Print Mailing Address)

\*To be used **ONLY IF** the person you list as your Proxy in Section 1 is unable to attend the meeting.  
**SUBSTITUTION OF PROXY**

The undersigned, appointed as proxy above, does hereby designate \_\_\_\_\_ to substitute for me in the proxy set forth above.

Dated: \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
PROXY

**THIS PROXY IS REVOCABLE BY THE UNIT OWNER AND IS VALID ONLY FOR THE MEETING FOR WHICH IT IS GIVEN AND ANY LAWFUL ADJOURNMENT. IN NO EVENT IS THE PROXY VALID FOR MORE THAN NINETY (90) DAYS FROM THE DATE OF THE ORIGINAL MEETING FOR WHICH IT WAS GIVEN.**

\*Failure to check **either** a) or b), **or**, if b) is checked, failure to **write in** the name of the Proxy, shall be deemed an appointment of the Acting Vice President of the Association as your Proxy.

# WINDS OF PARADISE OWNERS ASSOCIATION

c/o Prestige Property Mgmt.  
PO Box 507 – Cape Canaveral – Florida  
321-501-0654 - prestigeofbrevard@att.net

## Notice and Agenda Special Meeting of the Membership To be held August 30, 2023 In the clubhouse 6:00 p.m.

This Meeting will be held by Zoom Video Platform conference AND IN PERSON AT THE CLUBHOUSE and is held for the agenda items below. Please join the ZOOM meeting by copying and pasting the link below and entering it on your web browser. You may also attend the meeting by phone by calling into one of the phone numbers listed below. \*This Meeting shall start immediately at 6:00 p.m. so please log on/phone in at least 5 minutes prior to the meeting.

### Join Zoom Meeting

<https://us02web.zoom.us/j/83003810110>

Phone in:

1 305 224 1968

**Please note:** Input will be accepted at the end of the posted agenda. Please remember to keep your comments specific to the agenda and that they last no longer than 3 minutes. The Board estimates this Meeting shall last approximately 50 minutes. Please govern yourself accordingly.

1. Call to order
2. Establishment of Quorum
3. Proof of Notice
4. Reading or Waiver of Reading of the Previous Meeting Minutes, if any
5. Old Business: None
6. New Business:
  - a. Tally and announce results of proxy question #1 – using reserves for other than originally intended for
  - b. Tally and announce results of proxy question #2 – special assessment for insurance premiums/repay reserves
7. Next Meeting Date: TBD
8. Adjournment

# WINDS OF PARADISE OWNERS ASSOCIATION

c/o Prestige Property Mgmt.  
PO Box 507 – Cape Canaveral – Florida  
321-501-0654 - prestigeofbrevard@att.net

## Notice and Agenda Board of Directors To be held August 30, 2023 In the clubhouse 6:15\* p.m.

This Meeting will be held by Zoom Video Platform conference AND IN PERSON AT THE CLUBHOUSE and is held for the agenda items below. Please join the ZOOM meeting by copying and pasting the link below and entering it on your web browser. You may also attend the meeting by phone by calling into one of the phone numbers listed below. \*This Meeting shall start immediately at 6:00 p.m. so please log on/phone in at least 5 minutes prior to the meeting.

### Join Zoom Meeting

<https://us02web.zoom.us/j/83003810110>

Phone in:

1 305 224 1968

**Please note:** Input will be accepted at the end of the posted agenda. Please remember to keep your comments specific to the agenda and that they last no longer than 3 minutes. The Board estimates this Meeting shall last approximately 50 minutes. Please govern yourself accordingly.

1. Call to order
2. Establishment of Quorum
3. Proof of Notice
4. Reading or Waiver of Reading of the Previous Meeting Minutes, if any
5. Old Business: None
6. New Business:
  - a. Tally and announce results of proxy questions
  - b. Levy Special Assessment
7. Next Meeting Date: TBD
8. Adjournment

Winds of Paradise Owners Association

Lori Barella  
321-501-0654

**\*\*Current Values**

	<u>2022-2023</u>		<u>2023-2024</u>
Property	\$ 68,916.55	Property	\$ 103,091.95
GL	\$ 2,710.14	GL*	\$ 2,650.42
Crime	\$ 555.14	Crime	inc w/D&O
D&O	\$ 1,982.76	D&O	\$ 2,219.33
Excess Liability	\$ 1,215.26	Excess Liability	\$ 1,455.00
<b>Total</b>	<b>\$ 75,379.85</b>	<b>Total</b>	<b>\$ 109,416.70</b>
		<b>Difference</b>	<b>\$ 34,036.85</b>

\*Includes Paid in Full Discount

**\*\*Estimated with Appraised Values**

	<u>2022-2023</u>		<u>2023-2024</u>
Property	\$ 68,916.55	Property	\$ 147,565.00
GL	\$ 2,710.14	GL*	\$ 2,650.42
Crime	\$ 555.14	Crime	inc w/D&O
D&O	\$ 1,982.76	D&O	\$ 2,219.33
Excess Liability	\$ 1,215.26	Excess Liability	\$ 1,455.00
<b>Total</b>	<b>\$ 75,379.85</b>	<b>Total</b>	<b>\$ 153,889.75</b>
		<b>Difference</b>	<b>\$ 78,509.90</b>

\*Includes Paid in Full Discount



***Winds of Paradise Owners Association, Inc.***  
***c/o Prestige Property Management***  
***Cape Canaveral, FL 32920***  
***(2023-2024)***

<b>Property</b>	<b>(Frontline Ins)</b>	
		<b>**Estimated Premium using 2023 Appraisal**</b>
		Real Property Total Insurable Value \$10,364,110
		Replacement Cost / Special Form / Co-Ins: Agreed Amount
		Ordinance or Law Coverage: Full A, Combined B/C 2.5%
		Equipment Breakdown Coverage Excluded
<b>Deductibles</b>		\$5,000 All Other Perils
		2% Calendar Year Hurricane
		<b>Yearly Premium: \$147,565.00</b>
<b>General Liability</b>	<b>(Southern-Owners)</b>	
	General Aggregate	\$2,000,000
	Products Aggregate	\$1,000,000
	Pers. & Advertising	\$1,000,000
	Each Occurrence	\$1,000,000
	Hired/Non-Owned	\$1,000,000
		<b>Yearly Premium: \$2,650.42</b>
		<b>(Paid in Full Discount)</b>
<b>Crime</b>	<b>(CNA)</b>	
		\$120,000 Subject to \$1,200 Deductible
		<b><i>Packaged with D&amp;O</i></b>
<b>Directors &amp; Officers</b>	<b>(CNA)</b>	
	Each Loss	\$1,000,000
	Each Policy Year	\$1,000,000
	Deductible	\$ 2,500
		<b>Yearly Premium: \$2,219.33</b>
<b>Excess Liability</b>	<b>(Greenwich Ins)</b>	
	General Aggregate	\$5,000,000
	Each Occurrence	\$5,000,000
		<b>Yearly Premium: \$1,455.00</b>

**Total Yearly Premium: \$153,889.75**

2:45 PM

08/13/23

Accrual Basis

Winds of Paradise Owners Association, Inc.

Balance Sheet

As of August 14, 2023

	<u>Aug 14, 23</u>
<b>ASSETS</b>	
Current Assets	
Checking/Savings	
Reserve Account	
Sunrise Reserve	101,786.08
Total Reserve Account	101,786.08
Operating Account	
Sunrise Operating	42,178.91
Total Operating Account	42,178.91
Total Checking/Savings	143,964.99
Accounts Receivable	
Accounts Receivable	125,158.26
Total Accounts Receivable	125,158.26
Total Current Assets	269,123.25
<b>TOTAL ASSETS</b>	<b>269,123.25</b>
<b>LIABILITIES &amp; EQUITY</b>	
Equity	
Reserves	
Reserve Funds	
R-Reserve Interest	1,507.34
R-Roofs	35,526.80
R-Pool-Resurfacing/Tile/D...	32,419.72
R-Pool - Fencing & Gates	5,792.08
R-Pavement - Sealcoat	2,873.35
R-Pavement - Asphalt Over...	2,335.21
R-Painting Reserve	16,752.88
R-Clubhouse Reserve	4,578.70
Total Reserve Funds	101,786.08
Total Reserves	101,786.08
Opening Balance Equity	228,819.63
Unrestricted Net Assets	-78,178.99
Net Income	16,696.53
Total Equity	269,123.25
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b>269,123.25</b>



Frontline Insurance

PAYMENT PLAN OPTIONS:

Note: Dates and amounts shown are approximations. \$2.00 installment charge is included per installment below.

Full Pay	AMOUNT DUE	INVOICE DATE	DUE DATE
1	\$147,565.00	8/21/23	
2 Pay	AMOUNT DUE	INVOICE DATE	DUE DATE
1	\$77,472.86	8/21/23	
2	\$70,094.15	1/21/24	2/15/24
4 Pay	AMOUNT DUE	INVOICE DATE	DUE DATE
1	\$42,426.79	8/21/23	
2	\$35,048.07	10/21/23	11/15/23
3	\$35,048.07	1/21/24	2/15/24
4	\$35,048.07	4/21/24	5/16/24
8 Pay	AMOUNT DUE	INVOICE DATE	DUE DATE
1	\$42,426.79	8/21/23	
2	\$15,021.75	9/21/23	10/16/23
3	\$15,021.75	10/21/23	11/15/23
4	\$15,021.75	11/21/23	12/16/23
5	\$15,021.75	12/21/23	1/15/24
6	\$15,021.75	1/21/24	2/15/24
7	\$15,021.75	2/21/24	3/17/24
8	\$15,021.75	3/21/24	2/27/00
10 Pay	AMOUNT DUE	INVOICE DATE	DUE DATE
1	\$42,426.79	8/21/23	
2	\$11,684.02	9/21/23	10/16/23
3	\$11,684.02	10/21/23	11/15/23
4	\$11,684.02	11/21/23	12/16/23
5	\$11,684.02	12/21/23	1/15/24
6	\$11,684.02	1/21/24	2/15/24
7	\$11,684.02	2/21/24	3/17/24
8	\$11,684.02	3/21/24	4/15/24
9	\$11,684.02	4/21/24	5/16/24
10	\$11,684.02	5/21/24	6/14/24

LENDER:

PREMIUM FINANCE AGREEMENT

450 Skokie Blvd, Ste 1000

Personal  Commercial  Additional Premium

Northbrook, IL 60062-7917
P:(800) 837-3707 F:(800) 837-3709
www.firstinsurancefunding.com

FIRST INSURANCE FUNDING
A WINTRUST COMPANY

Quote #: 53598306

Table with 2 columns: INSURED/BORROWER (Name and Address as shown on Policy) and AGENT or BROKER (Name and Business Address). Includes details for Winds of Paradise and AssuredPartners of Florida, LLC.

LOAN DISCLOSURE

Table with 8 columns: Total Premiums, Taxes, and Fees; Down Payment; Unpaid Balance; Documentary Stamp Tax; Amount Financed; FINANCE CHARGE; Total of Payments; ANNUAL PERCENTAGE RATE.

YOUR PAYMENT SCHEDULE WILL BE: Mail Payments to: FIRST Insurance Funding, PO Box 7000, Carol Stream, IL 60197-7000

Table with 4 columns: Number of Payments, Amount of Each Payment, First Installment Due, Installment Due Dates.

Certain information contained in the Loan Disclosure section may change in accordance with Section 19 of this Agreement.

INSURED'S AGREEMENT:

- 1. SECURITY INTEREST. INSURED/BORROWER ("Insured") grants and assigns FIRST Insurance Funding...
2. FINANCE CHARGE. The finance charge begins accruing on the earliest effective date of the Financed Policies...
3. LATE PAYMENT. For commercial loans, a late charge will be assessed on any installment at least 5 days in default...
4. PREPAYMENT. If Insured prepays the loan in full, Insured is entitled to a refund of the unearned finance charge...

SCHEDULE OF POLICIES

Table with 6 columns: Policy Number, Full Name of Insurance Company and Name of General Agent or Company, Coverage, Policy Term, Effective Date, Premiums, Taxes and Fees.

Q# 53598306, PRN: 081123, CFG: A06319, RT: ASSUREDPARTNERS-CONDO, DD: N/A, BM: ACH, Qtd For: A06319 Original, Memo 0

- 5. PROMISE TO PAY. In consideration of the premium payment by LENDER to the insurance companies listed in the Schedule of Policies...
6. POWER OF ATTORNEY. INSURED IRREVOCABLY APPOINTS LENDER AS ITS "ATTORNEY-IN-FACT" with full power of substitution...
7. SIGNATURE & ACKNOWLEDGEMENT. Insured has received, reviewed, and signed a copy of this Agreement...
NOTICE TO INSURED: (1) Do not sign this Agreement before you read both pages of it... (2) You are entitled to a completely filled-in copy... (3) You have the right prepay the loan in full... (4) Keep a copy of this Agreement to protect your legal rights... (5) See last page of Agreement for your consent to electronic statement and notice delivery.

Signature of Insured or Authorized Agent

Date

Signature of Agent

Date