

**ACORD**<sup>TM</sup>**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

12/16/2025

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.

**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).

| <b>PRODUCER</b><br><b>McGriff, a MMA LLC Company</b><br><b>12485 28th St. North, Third Fl</b><br><b>St Petersburg, FL 33716</b>                                   | <b>CONTACT NAME: Anthony Russo</b><br><b>PHONE (A/C, No, Ext): 239-433-0307</b><br><b>FAX (A/C, No): 866-881-5271</b><br><b>E-MAIL ADDRESS: MCG.Certificateofinsurance@MarshMMA.com</b>   |                               |        |   |              |  |              |                    |  |                    |  |                    |  |                    |  |
|---|---|-------------------------------|--------|---|--------------|--|--------------|--------------------|--|--------------------|--|--------------------|--|--------------------|--|
| <b>INSURED</b><br><b>Pipers Glen Condominium Assoc Inc.</b><br><b>c/o Ameri-Tech</b><br><b>24701 US Highway 19 N. Ste 102</b><br><b>Clearwater, FL 33763-4086</b> | <table border="1"> <thead> <tr> <th data-bbox="816 426 1437 449">INSURER(S) AFFORDING COVERAGE</th> <th data-bbox="1437 426 1563 449">NAIC #</th> </tr> </thead> <tbody> <tr> <td data-bbox="816 449 1437 478"><b>INSURER A : Superior Specialty Insurance Company</b></td> <td data-bbox="1437 449 1563 478"><b>16551</b></td> </tr> <tr> <td data-bbox="816 478 1437 508"><b>INSURER B : American Coastal Insurance Co</b></td> <td data-bbox="1437 478 1563 508"><b>12968</b></td> </tr> <tr> <td data-bbox="816 508 1437 537"><b>INSURER C :</b></td> <td data-bbox="1437 508 1563 537"></td> </tr> <tr> <td data-bbox="816 537 1437 567"><b>INSURER D :</b></td> <td data-bbox="1437 537 1563 567"></td> </tr> <tr> <td data-bbox="816 567 1437 596"><b>INSURER E :</b></td> <td data-bbox="1437 567 1563 596"></td> </tr> <tr> <td data-bbox="816 596 1437 625"><b>INSURER F :</b></td> <td data-bbox="1437 596 1563 625"></td> </tr> </tbody> </table> | INSURER(S) AFFORDING COVERAGE | NAIC # | <b>INSURER A : Superior Specialty Insurance Company</b> | <b>16551</b> | <b>INSURER B : American Coastal Insurance Co</b> | <b>12968</b> | <b>INSURER C :</b> |  | <b>INSURER D :</b> |  | <b>INSURER E :</b> |  | <b>INSURER F :</b> |  |
| INSURER(S) AFFORDING COVERAGE   | NAIC #  |                               |        |   |              |  |              |                    |  |                    |  |                    |  |                    |  |
| <b>INSURER A : Superior Specialty Insurance Company</b>   | <b>16551</b>  |                               |        |   |              |  |              |                    |  |                    |  |                    |  |                    |  |
| <b>INSURER B : American Coastal Insurance Co</b>  | <b>12968</b>  |                               |        |   |              |  |              |                    |  |                    |  |                    |  |                    |  |
| <b>INSURER C :</b>  |   |                               |        |   |              |  |              |                    |  |                    |  |                    |  |                    |  |
| <b>INSURER D :</b>  |   |                               |        |   |              |  |              |                    |  |                    |  |                    |  |                    |  |
| <b>INSURER E :</b>  |   |                               |        |   |              |  |              |                    |  |                    |  |                    |  |                    |  |
| <b>INSURER F :</b>  |   |                               |        |   |              |  |              |                    |  |                    |  |                    |  |                    |  |

**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  |
|----------|---|-----------|------------|-----------------------|-------------------------|-------------------------|---|
| <b>A</b> | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><input checked="" type="checkbox"/> <b>Includes Separation of Insureds</b><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: |           |            | <b>TLUHOA50146401</b> | <b>11/02/2025</b>       | <b>11/02/2026</b>       | EACH OCCURRENCE <b>\$1,000,000</b><br>DAMAGE TO RENTED PREMISES (Ea occurrence) <b>\$50,000</b><br>MED EXP (Any one person) <b>\$5,000</b><br>PERSONAL & ADV INJURY <b>\$1,000,000</b><br>GENERAL AGGREGATE <b>\$2,000,000</b><br>PRODUCTS - COMP/OP AGG <b>\$2,000,000</b><br>\$ |
| <b>A</b> | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY<br><input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY  |           |            | <b>TLUHOA50146401</b> | <b>11/02/2025</b>       | <b>11/02/2026</b>       | COMBINED SINGLE LIMIT (Ea accident) <b>\$1,000,000</b><br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$   |
|          | <b>UMBRELLA LIAB</b><br><input type="checkbox"/> EXCESS LIAB<br><input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$  |           |            |                       |                         |                         | EACH OCCURRENCE \$<br>AGGREGATE \$<br>\$  |
|          | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N<br>(Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below   |           | <b>N/A</b> |                       |                         |                         | PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/><br>E.L. EACH ACCIDENT \$<br>E.L. DISEASE - EA EMPLOYEE \$<br>E.L. DISEASE - POLICY LIMIT \$  |
| <b>B</b> | <b>Property</b>   |           |            | <b>AMC3574707</b>     | <b>11/02/2025</b>       | <b>11/02/2026</b>       | <b>SEE DESCRIPTION SECTION</b>  |
| <b>A</b> | <b>D&amp;O Liability</b>  |           |            | <b>TLUHOA50146401</b> | <b>11/02/2025</b>       | <b>11/02/2026</b>       | <b>\$1,000,000/\$2,500 DED</b>  |
| <b>A</b> | <b>Crime Liability</b>  |           |            | <b>TLUHOA50146401</b> | <b>11/02/2025</b>       | <b>11/02/2026</b>       | <b>\$300,000/\$0 DED</b>  |

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

**B) Property Policy - Special Form/Replacement Cost**

Deductibles: 5% Hurricane per Calendar Year, per Building/\$5,000 All Other Perils per Occurrence/3% Sinkhole per Building, per Occurrence

Equipment Breakdown Included

Ordinance or Law - Coverage A/B/C Combined Limit: \$1,000,000

(See Attached Descriptions)

**CERTIFICATE HOLDER****CANCELLATION**

**Pipers Glen Condominium Assoc Inc.**  
**c/o Ameri-Tech**  
**24701 US Highway 19 N. Ste 102**  
**Clearwater, FL 33763-4086**

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)

Property Limits by address listed below:

1554, 1556, 1558 Glen Court, Dunedin, FL (3 Residential Condominium Units) - Building Limit: \$469,837/3

Stall Carport Limit: 13,500

1560-1566 Glen Court, Dunedin, FL (4 Residential Condominium Units) Building Limit: \$638,719/4-Stall

Carport Limit: 18,000

1568-1574 Glen Court, Dunedin, FL (4 Residential Condominium Units) - Building Limit: \$598,518/4-Stall

Carport Limit: 18,000

1576-1580 Glen Court, Dunedin, FL (3 Residential Condominium Units) - Building Limit: \$469,837/3-Stall

Carport Limit: 13,500

1582 & 1584 Heather Court, Dunedin, FL (2 Residential Condominium Units) - Building Limit: \$357,144/4-Stall

Carport Limit: 18,000

1586-1592 Heather Court, Dunedin, FL (4 Residential Condominium Units) - Building Limit: \$607,343/4-Stall

Carport Limit: 18,000

1594 & 1596 Heather Court, Dunedin, FL (2 Residential Condominium Units) - Building Limit: \$374,085

1569-1575 Amberlea Drive South, Dunedin, FL (4 Residential Condominium Units) Building Limit: \$593,915/4

Stall Carport Limit: 18,000

1577-1583 Amberlea Drive South, Dunedin, FL (4 Residential Condominium Units) - Building Limit: \$593,462/4

Stall Carport Limit: 18,000

1585-1591 Amberlea Drive South, Dunedin, FL (4 Residential Condominium Units) - Building Limit: \$593,606/4

Stall Carport Limit: 18,000

1593-1599 Amberlea Drive South, Dunedin, FL (4 Residential Condominium Units) - Building Limit: \$593,462/3

Stall Carport Limit: 13,500

1601, 1603, 1607 Amberlea Drive South, Dunedin, FL (3 Residential Condominium Units) - Building Limit:

\$499,683/4-Stall Carport Limit: 18,000

TIV: \$6,574,111

\*Management, Board Members, and Board approved volunteers are covered under the Fidelity Bond and Directors & Officers Liability.

\*Separation of Insureds or Severability is included as part of the General Liability coverage form.

\*Cancellation Policy: 10-day notification for non-payment of premium, 45-days all other reasons.

\*Transfer of Rights of Recovery against others included.

Due to an addition to Florida Statute 626.9551, effective July 1, 2021, no one (including a lender) may require an insurance agency or agent provide a replacement cost estimator (RCE) or other insurance underwriting information in connection with a loan. Additionally, an insurance agent or agency is prohibited from supplying the RCE to anyone, even the customer. We are, therefore, unable to provide a copy of the Replacement Cost Estimator / Appraisal.

FLOOD COVERAGE IS CURRENTLY NOT WRITTEN THROUGH MCGRUFF

\*\*\*FOR INFORMATIONAL PURPOSES ONLY\*\*\*