



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

07/07/2025

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY Wellhouse Company, LLC 1 Independent Drive Suite 3125 Jacksonville FL 32202	PHONE (A/C, No, Ext): (904) 256-9481	COMPANY Velocity Specialty Insurance Co PO Box 890881 Charlotte NC 28289-0881
FAX (A/C, No): (904) 372-1860	E-MAIL ADDRESS: Cmason@wellhousecompany.com	
CODE: AGT56684	SUB CODE:	
AGENCY CUSTOMER ID #: 00001167		
INSURED Penman Center Office Condominium Association Inc. C/o Duval Realty, Inc. 6196 Lake Gray Blvd. Jacksonville FL 32244	LOAN NUMBER	POLICY NUMBER 202500793701
	EFFECTIVE DATE 03/24/2025	EXPIRATION DATE 03/24/2026
		<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
	THIS REPLACES PRIOR EVIDENCE DATED:	

PROPERTY INFORMATION

LOCATION/DESCRIPTION 1301 & 1401 Penman Rd Jacksonville Beach Loc# 00001/Bldg# 00001 FL 32250
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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION

PERILS INSURED ☐ BASIC ☐ BROAD ☒ SPECIAL ☐

COVERAGE / PERILS / FORMS

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
BLDG 1 Replacement Cost, Special Form Equipment Breakdown Included Ordinance & Law A: \$250,000/ B: 10%/ C:5% 5% Wind/Hail Deductible, per occurrence	1,740,000	2,500

REMARKS (Including Special Conditions)

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.

ADDITIONAL INTEREST

NAME AND ADDRESS For Informational Purposes	ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	LOSS PAYEE
	MORTGAGEE	<input checked="" type="checkbox"/> Certificate Holder	
	LOAN #		
	AUTHORIZED REPRESENTATIVE <i>Carrie B. Smith</i>		