EVIDENCE OF PROPERTY INSURANCE

ACORD®

DATE (MM/DD/YYYY)
03/30/2026

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	PHONE (A/C, No, Ext): (904) 256-9481	COMPANY
Wellhouse Company, LLC		
1 Independent Drive Suite 3125		U.S. Coastal Insurance Company
		3700 NW 91st Street, A100
Jacksonville FL 32202		

FAX (A/C, No): (904) 372-1860	E-MAIL ADDRESS: Cmason@wellhousecompany.com	Gainesville FL

CODE:	SUB CODE:

AGENCY CUSTOMER ID #: 00001100

INSURED	LOAN NUMBER	POLICY NUMBER
Villa Beauclerc Condominium Association, Inc.		11A0000200
6196 Lake Gray Blvd UNIT 103		

	EFFECTIVE DATE	EXPIRATION DATE	CONTINUED UNTIL TERMINATED IF CHECKED
	04/01/2026	04/01/2027	

Jacksonville FL 32244	THIS REPLACES PRIOR EVIDENCE DATED:

PROPERTY INFORMATION

LOCATION/DESCRIPTION

9525 Armelle Way

Jacksonville   FL 32257

Loc# 00001/Bldg# 00001 See Overflow

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	AMOUNT OF INSURANCE	DEDUCTIBLE
16 Unit Condo Bldg, Replacement Cost, Special Form	2,930,660	10,000
Policy Coverages:		
188 Units		
Equipment Breakdown Included		
Hurricane Deductible: 3% per Building, per Calendar Year		
Ordinance & Law: Full A/ B&C: $1,000,000		
Agreed Amount/ No Coinsurance		
2% Inflation Guard Included		

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		
	☐ ADDITIONAL INSURED	☐ LENDER'S LOSS PAYABLE	☐ LOSS PAYEE
	☐ MORTGAGEE	☒ Certificate Holder	
Informational Purposes	LOAN #	

AUTHORIZED REPRESENTATIVE
Caris Baptiste

ACORD 27 (2016/03)

ADDITIONAL COVERAGES

Ref #	Description			Coverage Code	Form No.	Edition Date
1	00002, 9505 Armelle Way, 16 Unit Condo Bldg			SPCDT		

Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
2,930,660			10,000	Flat	

Ref #	Description			Coverage Code	Form No.	Edition Date
1	00003, 9536 ARmelle Way, 16 Unit Condo Bldg			SPCDT		

Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
2,930,660			10,000	Flat	

Ref #	Description			Coverage Code	Form No.	Edition Date
1	00004, 9555 Armelle Way, 16 Unit Condo Bldg			SPCDT		

Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
2,930,660			10,000	Flat	

Ref #	Description			Coverage Code	Form No.	Edition Date
1	00005, 9556 Armelle Way, 16 Unit Condo Bldg			SPCDT		

Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
2,930,660			10,000	Flat	

Ref #	Description			Coverage Code	Form No.	Edition Date
1	00006, 9575 Amarante Cir, 16 Unit Condo Bldg			SPCDT		

Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
2,930,660			10,000	Flat	

Ref #	Description			Coverage Code	Form No.	Edition Date
1	00007, 9595 Amarante Cir, 16 Unit Condo Bldg			SPCDT		

Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
2,930,660			10,000	Flat	

Ref #	Description			Coverage Code	Form No.	Edition Date
1	00008, 9570 Amarante Cir, 16 Unit Condo Bldg			SPCDT		

Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
2,930,660			10,000	Flat	

Ref #	Description			Coverage Code	Form No.	Edition Date
1	00009, 9690 Amarante Cir, 16 Unit Condo Bldg			SPCDT		

Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
2,930,660			10,000	Flat	

Ref #	Description			Coverage Code	Form No.	Edition Date
1	00010, 9626 Belda Way, 16 Unit Condo Bldg			SPCDT		

Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
2,930,660			10,000	Flat	

Ref #	Description			Coverage Code	Form No.	Edition Date
1	00011, 9627 Belda Way, 16 Unit Condo Bldg			SPCDT		

Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
2,930,660			10,000	Flat	

Ref #	Description			Coverage Code	Form No.	Edition Date
1	00012, 9576 Amarante Way, 12 Unit Condo Bldg			SPCDT		

Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
2,930,660			10,000	Flat	

ADDITIONAL COVERAGES

Ref # 1	Description 00013, 9626 Belda Way, Vinyl Fencing				Coverage Code SPCDT	Form No.	Edition Date
Limit 1 80,000	**Limit 2**	**Limit 3**	**Deductible Amount** 10,000	**Deductible Type** Flat	**Premium**	

Ref # 1	Description 00014, 9626 Belda Way, Pool Fencing				Coverage Code SPCDT	Form No.	Edition Date
Limit 1 10,000	**Limit 2**	**Limit 3**	**Deductible Amount** 10,000	**Deductible Type** Flat	**Premium**	

Ref #	Description				Coverage Code	Form No.	Edition Date
Limit 1	**Limit 2**	**Limit 3**	**Deductible Amount**	**Deductible Type**	**Premium**	

Ref #	Description				Coverage Code	Form No.	Edition Date
Limit 1	**Limit 2**	**Limit 3**	**Deductible Amount**	**Deductible Type**	**Premium**	

Ref #	Description				Coverage Code	Form No.	Edition Date
Limit 1	**Limit 2**	**Limit 3**	**Deductible Amount**	**Deductible Type**	**Premium**	

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