



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/15/2026

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 rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Florida Condominium & Apartment Insurance, Inc. 1360 S. Patrick Drive, Suite 11 Satellite Beach, FL 32937	CONTACT NAME: Brittany Alkire PHONE (A/C, No, Ext): (321)775-1777 E-MAIL ADDRESS: balkire@fcains.com FAX (A/C, No): (321)600-2076
INSURED EMERALD SEAS CONDOMINIUM ASSOCIATION INC. 3450 OCEAN BEACH BLVD COCOA BEACH, FL 32931	INSURER(S) AFFORDING COVERAGE INSURER A: SUPERIOR SPECIALTY INSURANCE COMPANY INSURER B: SPINNAKER SPECIALTY / LIBERTY INSURANCE INSURER C: ZENITH INSURANCE COMPANY INSURER D: INSURER E: INSURER F:

COVERAGES**CERTIFICATE NUMBER: 00002309-34313****REVISION NUMBER: 2**

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:			TLUCAP502945-01	05/31/2026	05/31/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	☐ AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY			TLUCAP502945-01	05/31/2026	05/31/2027	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	☐ UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$			PPP3004339	05/31/2026	05/31/2027	EACH OCCURRENCE \$ 15,000,000 AGGREGATE \$ 15,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N ☐	N / A	Z127202212	05/31/2026	05/31/2027	PER STATUTE ☐ OTH-ER ☐ E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	CRIME			TLUCAP502945-01	05/31/2026	05/31/2027	EMPLOYEE THEFT \$ 2,000,000
A	DIRECTORS & OFFICERS			TLUCAP5002945-01	05/31/2026	05/31/2027	\$ 1,000,000

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

EXCESS CRIME - TRAVELERS CASUALTY & SURETY #107852319 05/31/2026-05/31/2027 \$1,000,000**LEGAL DEFENSE GAP - BOLD LEGAL DEFENSE INSURANCE #202605-31663 05/31/2026-05/31/2027****3400 - 3450 OCEAN BEACH BLVD**
COCOA BEACH FL 32931**TOTAL OF 105 UNITS IN THE ASSOCIATION****CERTIFICATE HOLDER****CANCELLATION****FOR INFORMATIONAL PURPOSES ONLY**
EMERALD SEAS CONDOMINIUM ASSOCIATION
3450 OCEAN BEACH BLVD
COCOA BEACH, FL 32931

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

(BAN)

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EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)
06/15/2026

THIS EVIDENCE OF COMMERCIAL 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.

PRODUCER NAME, CONTACT PERSON AND ADDRESS Florida Condominium & Apartment Insurance, Inc. 1360 S. Patrick Drive, Suite 11 Satellite Beach, FL 32937		PHONE (A/C, No, Ext): (321)775-1777		COMPANY NAME AND ADDRESS Centauri Specialty Insurance Company 4081 Lakewood Ranch Blvd Sarasota FL 34240		NAIC NO:	
FAX (A/C, No): (321)600-2076		E-MAIL ADDRESS: balkire@fcains.com		IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH			
CODE:		SUB CODE:		POLICY TYPE PROPERTY			
AGENCY CUSTOMER ID #: 00002309				LOAN NUMBER		POLICY NUMBER CRP 0000727-01	
NAMED INSURED AND ADDRESS EMERALD SEAS CONDOMINIUM ASSOCIATION INC. 3450 OCEAN BEACH BLVD COCOA BEACH, FL 32931				EFFECTIVE DATE 05/31/2026		EXPIRATION DATE 05/31/2027	
						☐ CONTINUED UNTIL TERMINATED IF CHECKED	
ADDITIONAL NAMED INSURED(S)				THIS REPLACES PRIOR EVIDENCE DATED:			

PROPERTY INFORMATION (ACORD 101 may be attached if more space is required) ☒ BUILDING OR ☐ BUSINESS PERSONAL PROPERTY

LOCATION / DESCRIPTION 3400-3450 OCEAN BEACH BLVD COCOA BEACH FL 32931	Description: TOTAL OF 105 UNITS
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	
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 44,845,688				DED: \$1,000		
	YES	NO	N/A			
☐ BUSINESS INCOME ☐ RENTAL VALUE		☒		If YES, LIMIT: Actual Loss Sustained; # of months:		
BLANKET COVERAGE		☒		If YES, indicate value(s) reported on property identified above: \$		
TERRORISM COVERAGE		☒		Attach Disclosure Notice / DEC		
IS THERE A TERRORISM-SPECIFIC EXCLUSION?	☒					
IS DOMESTIC TERRORISM EXCLUDED?	☒					
LIMITED FUNGUS COVERAGE		☒		If YES, LIMIT: DED:		
FUNGUS EXCLUSION (If "YES", specify organization's form used)	☒					
REPLACEMENT COST		☒				
AGREED VALUE		☒				
COINSURANCE		☒		If YES, %		
EQUIPMENT BREAKDOWN (If Applicable)	☒			If YES, LIMIT: \$44,845,688 DED: \$5,000		
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg	☒			If YES, LIMIT: Included DED:		
- Demolition Costs	☒			If YES, LIMIT: \$2,242,284 DED:		
- Incr. Cost of Construction	☒			If YES, LIMIT: \$2,242,284 DED:		
EARTH MOVEMENT (If Applicable)		☒		If YES, LIMIT: DED:		
FLOOD (If Applicable)		☒		If YES, LIMIT: DED:		
WIND / HAIL INCL ☒ YES ☐ NO Subject to Different Provisions:	☒			If YES, LIMIT: \$44,845,688 DED: \$1,000		
NAMED STORM INCL ☒ YES ☐ NO Subject to Different Provisions:	☒			If YES, LIMIT: \$44,845,688 DED: 2%		
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS						

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

CONTRACT OF SALE	LENDER'S LOSS PAYABLE	LOSS PAYEE	LENDER SERVICING AGENT NAME AND ADDRESS
MORTGAGEE			
NAME AND ADDRESS FOR INFORMATIONAL PURPOSES ONLY EMERALD SEAS CONDOMINIUM ASSOCIATION INC 3450 OCEAN BEACH BLVD COCOA BEACH FL 32931			AUTHORIZED REPRESENTATIVE 

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AGENCY CUSTOMER ID: 00002309

LOC #:



ADDITIONAL REMARKS SCHEDULE

Page ____ of ____

AGENCY Florida Condominium & Apartment Insurance, Inc.		NAMED INSURED EMERALD SEAS CONDOMINIUM ASSOCIATION INC.	
POLICY NUMBER CRP 0000727-01		3450 OCEAN BEACH BLVD COCOA BEACH, FL 32931	
CARRIER Centauri Specialty Insurance Company	NAIC CODE	EFFECTIVE DATE: 05/31/2026	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: _____ FORM TITLE: _____

Building Description	Building Limit
#3450 & #3400	\$44,845,688
Clubhouse	\$470,574
Pool & Equipment	\$100,001
Spa	\$21,250
Tennis Fencing	\$12,000
Tennis Court	\$36,290
Perimeter Wall	\$386,913
Chain link fencing	\$12,000
Light poles	\$21,890
Entry/Exit gate system	\$56,180
Flag pole	\$3,000
LED lighting	\$10,000
Office Buildout	\$20,000
Dune crossover	\$240,000
TOTAL	\$46,235,786