



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/05/2026

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 Brown & Brown Insurance Services, Inc. 1201 W Cypress Creek Rd Suite 130 Fort Lauderdale FL 33309	CONTACT NAME: EOI Direct PHONE (A/C, No, Ext): (877) 456-3643 E-MAIL ADDRESS: help@eoidirect.com FAX (A/C, No): INSURER(S) AFFORDING COVERAGE INSURER A: Kinsale Insurance Company INSURER B: Midvale Indemnity Company INSURER C: Accredited Surety and Casualty Company, Inc. INSURER D: INSURER E: INSURER F:	NAIC # 38920 27138 26739
INSURED Royal Poinciana Condominium Association, Inc. 1275 SW 46th Ave Pompano Beach FL 33069		

COVERAGES**CERTIFICATE NUMBER:** 26-27 Master COI**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 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:			01003664831	04/29/2026	04/29/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 1,000 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 ☒ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS ONLY			01003664831			COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	☒ UMBRELLA LIAB ☒ EXCESS LIAB DED RETENTION \$ ☒ OCCUR ☐ CLAIMS-MADE			PRP229824000024070064	04/30/2026	04/29/2027	EACH OCCURRENCE \$ 15,000,000 AGGREGATE \$ 15,000,000
	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						PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	Directors and Officers			1SKNFL170158517200	04/29/2026	04/29/2027	General Aggregate \$1,000,000

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

Condominium association with 384 units located at 1275 SW 46th Ave, Pompano Beach, FL 33069.

CERTIFICATE HOLDER**CANCELLATION**

Royal Poinciana Condominium Association, Inc 1275 SW 46th Ave Pompano Beach FL 33069	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
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AGENCY CUSTOMER ID: 00925161

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page ____ of ____

AGENCY Brown & Brown Insurance Services, Inc.		NAMED INSURED Royal Poinciana Condominium Association, Inc.	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance: Notes

PROPERTY

Policy #: CRMICCRE0000008200
 Policy Term: 04/29/2026 – 04/29/2027
 Carrier: Mainsail Insurance Company / NAIC #17203
 TIV: \$47,508,120

Cause of Loss: Special Form / Coinsurance: Agreed Value / Valuation: Replacement Cost / Equipment Breakdown Included / Ordinance or Law A, B, C
 Combined \$500,000

Deductibles: 5% Hurricane Per Calendar Year / All Other Perils - \$10,000 Per Occurrence

CRIME

Policy #: QDR000260201
 Policy Term: 04/29/2026 – 04/29/2027
 Carrier: StarNet Insurance Company / NAIC #40045
 Employee Theft: \$1,000,000 / Deductible: \$5,000 Per Occurrence

Location Schedule

Named Insured: Royal Poinciana Condominium Association, Inc.

Address	Description	Limit of Insurance
1223-1283 SW 46 th Ave, Pompano Beach, FL 33069	Building	1,198,320
	Building	1,723,800
	Building	1,723,800
	Building	1,971,000
	Building	1,971,000
	Building	1,198,320
	Building	2,039,160
	Building	2,039,160
	Building	1,723,800
	Building	1,198,320
	Building	1,971,000
	Building	1,971,000
	Building	2,039,160
	Building	1,723,800
	Building	1,198,320
	Building	1,723,800
	Building	1,971,000
	Building	2,039,160
	Building	1,723,800
	Building	1,723,800
	Building	2,039,160
	Building	1,971,000
	Building	1,723,800
	Building	1,198,320
	Building	1,971,000
	Building	1,198,320
	Building	1,723,800
	Building	365,700
	Business Personal Property	50,000
	Fences	6,500
	Gates	92,000
	Lights	10,000
	Pool	167,000
	Signs	20,000
	Tennis courts	100,000
Total Insured Value: \$47,508,120		