



Amwins Insurance Brokerage, LLC
10201 Centurion Parkway North
Suite 400
Jacksonville, FL 32256

amwins.com

January 20, 2023

Heacock Insurance Group, LLC
100 E. Main Street
Lakeland, FL 33802

RE: Mission Lakes at Oakbridge Condominium Association

PROPERTY QUOTATION

Please find the attached quotation for Mission Lakes at Oakbridge Condominium Association . Here is a summary of the terms and conditions:

INSURED: Mission Lakes at Oakbridge Condominium Association

MAILING ADDRESS: 2108 E Edgewood Drive
Lakeland, FL 33803

CARRIER: Steadfast Insurance Company (Non-Admitted)

PROPOSED POLICY PERIOD: From 2/8/2023 to 2/8/2024
12:01 A.M. Standard Time at the Mailing Address shown above

POLICY PREMIUM:	Premium	\$63,085.00
	Fees	\$1,125.00
	Surplus Lines Taxes and Fees	\$3,214.51
	Total	\$67,424.51

TRIA OPTIONS: TRIA can be purchased for an additional premium of \$2,523 plus applicable taxes and fees. Signed acceptance/rejection required at binding.

MINIMUM EARNED PREMIUM: Per attached quote

COMMISSION: 10.000% of premium excluding fees and taxes

SUBJECTIVITIES: SEE PAGE 6 OUTLINED IN RED

COMMENTS: Please review all contingencies on the attached company quote and let us know if you have any questions.

SURPLUS LINES TAX SUMMARY

HOME STATE: Florida

FEES:

Fee	Taxable	Amount
Market Inspection Fee	Yes	\$875.00
Market Policy Fee	Yes	\$250.00
Total Fees		\$1,125.00

SURPLUS LINES TAX CALCULATION:

State	Description	Taxable Premium	Taxable Fee	Tax Basis	Rate	Tax
Florida	Surplus Lines Tax	\$63,085.00	\$1,125.00	\$64,210.00	4.940%	\$3,171.98
	Stamping Fee	\$63,085.00	\$1,125.00	\$64,210.00	0.060%	\$38.53
	DEM EMP				Flat	\$4.00
Total Surplus Lines Taxes and Fees						\$3,214.51

Important Notice: Surplus Lines Tax Rates and Regulations are subject to change which could result in an increase or decrease of the total Surplus Lines Taxes and Fees owed on this placement. If a change is required, we will promptly notify you. Any additional taxes owed must be promptly remitted.

The attached Quotation from the carrier sets forth the coverage terms and conditions being offered. Please review carefully with your client as terms and conditions may differ from those requested in your submission. It is your responsibility to ensure the quoted coverage terms and conditions are sufficient to meet your client's coverage needs.

If after reviewing you should have any questions or requested changes, please let us know as soon as possible so we can discuss with the carrier prior to the effective date of coverage.

Thank you for the opportunity to provide this Quotation and I look forward to hearing from you.

Sincerely,

Mike Veniard

Executive Vice President | Amwins Insurance Brokerage, LLC
 T 904.380.3924 | F 877.570.9323 | Mike.Veniard@amwins.com
 10201 Centurion Parkway North | Suite 400 | Jacksonville, FL 32256 | amwins.com

In California: Amwins Brokerage Insurance Services | License 0F19710

SURPLUS LINES DISCLOSURE

Florida

SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

This insurance is issued pursuant to the Florida Surplus Lines Law. Persons insured by surplus lines carriers do not have the protection of the Florida Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent unlicensed insurer.

Overview of Minimum & Deposit Premium and Minimum Earned Premium



*A quotation is specifically tailored to meet the explicit requests of a policyholder. Material presented below is intended for information purposes only. It is **NOT** intended as a supplement or replacement for terms contained in a quotation or policy received from AmWINS Group. The information contained herein is for general guidance of matter only. Any views or opinions presented below are solely those of the author. Coverage afforded under any insurance policy issued is subject to individual policy terms and conditions.*

From time to time, AMWINS receives requests for an explanation of both Minimum & Deposit Premium and Minimum Earned Premium – both of which are terms that may appear on a quotation you receive from AmWINS.

The following is meant to provide a high level overview of these concepts. If you have specific questions about a proposal or policy you receive from AmWINS, please contact your AmWINS service team, and we will be happy to discuss in more detail.

MINIMUM & DEPOSIT

This is the amount of the premium due at inception. Although the policy is “ratable”, that is, subject to adjustment based on a rate per exposure unit, under no circumstances will the annual earned premium be less than the minimum premium. In other words, the policy may generate an additional premium based on audit but not a return.

If such a policy is canceled mid-term, the earned premium will be the greater of the annual minimum times the short rate or pro-rata factor, or the actual earned as determined by audit, subject to a short rate penalty if applicable.

MINIMUM EARNED PREMIUM

A minimum earned premium endorsement can be attached to either a flat charge policy or an adjustable policy. In either case, this amount is the least that will be retained by the carrier once the policy goes into effect. The amount retained will be the greater of the actual earned premium whether calculated on a pro-rata or short rate basis, or the minimum earned premium.

Property Quote

Quote Number

0048030B

Company: ZURICH

Carrier(s): Steadfast Insurance Company - Non-Admitted

Renewal (Y/N): Y

Insured Information Section

Proposal or Renewal Date

2/8/2023 12:01 a.m.

Quote Expiration Date

2/8/2023 12:01 a.m.

Named Insured: Mission Lakes At Oakbridge Condominium Association, Inc.

Mailing Address: 2108 E Edgewood Drive, Lakeland, FL 33803

Coverage Information Section

Summary of Limits / All Locations: * (Schedule of buildings and locations on following pages)

Building(s) Limit**

14,808,600

Business Personal Property

Business Income

* The schedule of all limits above is intended to provide an overview of all limits at scheduled locations listed within this quote, and does not represent that coverage is offered on a blanket basis.

**The building limit includes any scheduled sign, fence, light poles, satellite dish/antenna, swimming pools, tennis courts, guard house, gates, fountains or monuments and outdoor lighting if scheduled on the policy

Terms & Conditions include, but are not limited to, the following terms and conditions and exclusions:

Awnings & sign valuation is Actual Cash Value unless otherwise stated. When replacement cost coverage is offered, Insured must carry values equal to at least 90% of the current replacement cost value. No EIFS construction permitted. This policy contains a **(MINIMUM EARNED PREMIUM)** endorsement which is scheduled on the property forms page of this quotation. In the event of difference, Policy will prevail.

Major Exclusions: War, Terrorism, Earthquake, Flood; unless otherwise specified.

Premium Information Section

<u>Premium</u>	<u>Inspection Fee</u>	<u>Policy Fee</u>	<u>Surplus Lines Tax</u>	<u>Surplus Lines Fee</u>	<u>EMPA</u>	<u>Total Premium</u>
\$63,085.00	\$875.00	\$250.00	\$3,171.97	\$38.53	\$4.00	\$67,424.50
<u>Optional TRIA Premium</u>			<u>Surplus Lines Tax & Fee</u>		<u>Total Premium and Fees with TRIA</u>	
\$2,523.00			\$126.15		\$70,073.65	

Please bind coverage effective: _____ / _____ / _____ **Person requesting Binder:** _____

Agent Name: _____ **License Number:** _____

In order to bind the attached property quote we must have the following items:

- (1) Complete the items immediately above with effective date of coverage, producer's signature and license number.
- (2) Signed terrorism form either selecting or rejecting terrorism coverage.
- (3) Copy of signed application, including signed supplemental application and schedule of values.
- (4) A copy of the insured's flood declaration page or confirmation that flood coverage was offered and rejected by the Insured within 30 days from the binding date.

Additional Binding Conditions: This renewal is based on current underwriting information. Any changes including newly incurred losses may alter these terms. Location and Building detail as per Acord/SOV on file with company. Signed flood rejection form or copy of flood declaration pages for each building. Signed SOV required & No Prior or Existing Damage Statement.

NOTE ACV ON ROOFS PER FORM CP1036(10-12) WILL APPLY TO THE FOLLOWING Buildings 1 - 2 - 3 - 5 - 13 - 16 - 18 - 19 WHOSE ROOFS ARE IN THE PROCESS OF REPLACEMENT, UPON CONFIRMATION OF ROOF REPLACEMENT WITH SUPPORTING DOCUMENTATION THIS SUBJECTIVITY WILL BE REVIEWED

This quotation is being offered on the basis indicated. It is incumbent upon you to ascertain the accuracy of the quote and to review with the insured the terms of the quote carefully, as the coverage, terms and conditions may be different than those you requested. All requests to bind coverage must be received in our office in writing. Coverage cannot be backdated or presumed to be bound without confirmation from an authorized representative of Sigma Underwriting Managers. Be advised that if Sigma Underwriting Managers has not received a response from you by the expiration date of this quote, we will consider this quotation closed. Specimen policy and forms are available for your review upon request. Please be sure to check the carrier's A.M. Best rating to satisfy you and your client's interests.

Producer Code: Amwins Insurance Brokerage - Jacksonville

Underwriter: Lashon Woodberry

Property Quote

Date Quoted

Page 3

Quote Number

January 12, 2023

0048030B

FORMS SCHEDULE

The following forms will be attached to the policy if coverage is bound.

CIP	06 10	CERTIFICATE OF INSURANCE PROTOCOL
CP 00 17	06 07	CONDOMINIUM ASSOCIATION COVERAGE FORM
CP 00 90	07 88	COMMERCIAL PROPERTY CONDITIONS
CP 01 25	05 22	FLORIDA CHANGES
CP 01 40	07 06	EXCLUSION OF LOSS DUE TO VIRUS OR BACTERIA
CP 01 91	07 10	FLORIDA CHANGES - RESIDENTIAL CONDOMINIUM ASSOCIATIONS
CP 03 27	06 07	FLORIDA HURRICANE PERCENTAGE DEDUCTIBLE - EACH HURRICANE (RESIDENTIAL RISKS)
CP 04 05	04 02	ORDINANCE OR LAW COVERAGE
CP 10 30	06 07	CAUSES OF LOSS - SPECIAL FORM
CP 10 32	08 08	WATER EXCLUSION ENDORSEMENT
CP 10 36	10 12	LIMITATIONS ON COVERAGE FOR ROOF SURFACING
CP 10 46	10 12	EQUIPMENT BREAKDOWN CAUSE OF LOSS
EM 06 03	08 09	ADDITIONAL PROPERTY NOT COVERED
EM 25 02	06 19	COMMERCIAL LINES POLICY
EM 25 06	06 19	IMPORTANT CLAIM REPORTING INFORMATION
EM 36 01	06 19	COMMON POLICY DECLARATIONS
EM 36 06	03 02	COMMERCIAL PROPERTY COVERAGE PART DECLARATIONS PAGE
EM 67 02	11 18	ADDITIONAL COVERAGE ENDORSEMENT
EM 67 03	01 09	ADDITIONAL PROPERTY IN - TRANSIT COVERAGE ENDORSEMENT
EPL Ver. - 1.1	12 11	POLICY COVER LETTER
IL 00 03 (09 08)	09 08	CALCULATION OF PREMIUM
IL 00 17	11 98	COMMON POLICY CONDITION
IL 01 75	09 07	FLORIDA CHANGES - LEGAL ACTION AGAINST US
IL 09 35	07 02	EXCLUSION OF CERTAIN COMPUTER-RELATED LOSSES
JF 645 B	03 18	FLORIDA NOTIFICATION OF SURPLUS LINES POLICY
STF CP 286 A CW	09 10	WATER BACK-UP AND SUMP OVERFLOW - AGGREGATE LIMIT
STF CP 378 B FL	10 17	MULTIPLE DEDUCTIBLE SCHEDULE - FLORIDA
STF CP 387 A	06 16	FLORIDA CHANGES - CANCELLATION AND NONRENEWAL
STF CP 419 A CW	01 21	LOSS ASSIGNMENTS - EXCLUSION
STF GU 199 B	01 09R4	IMPORTANT NOTICE - SERVICE OF SUIT AND IN WITNESS CLAUSE
SUM 01	00 00	COVERAGES PROVIDED SCHEDULE
SUM 02	00 00	DEDUCTIBLE SCHEDULE
SUM 03	00 00	OPTIONAL COVERAGES SCHEDULE
SUM 04	00 00	MORTGAGE HOLDERS SCHEDULE
SUM 05	00 00	DESCRIPTION OF PREMISES SCHEDULE
SUM01	00 00	COVERAGES PROVIDED SCHEDULE (GENERAL POLICY INFORMATION)
U CP 606 A	07 01	EXCLUSION FOR SOFTWARE AND DATA-RELATED LOSSES
U CP 750 A CW	05 15	MINIMUM EARNED PREMIUM (HURRICANE SEASON)
U CP 759 B FL	11 20	FLORIDA CHANGES - MEDIATION OR APPRAISAL
U GU 1191 A CW	03 15	SANCTIONS EXCLUSION ENDORSEMENT
U GU 279 F	05 19	COMMERCIAL PROPERTY & CASUALTY RISK MANAGEMENT PLANS
U GU 395 D	07 09	IMPORTANT NOTICE TO FLORIDA POLICYHOLDERS
U GU 619 A CW	10 02	FORMS SCHEDULE
U GU 630 E CW	01 20	DISCLOSURE OF IMPORTANT INFORMATION RELATING TO TERRORISM RISK INSURANCE ACT
U GU 873 A CW	06 11	DISCLOSURE STATEMENT - INSTRUCTION TO AGENT OR BROKER
U GU 874 A CW	06 11	DISCLOSURE STATEMENT - INSTRUCTION TO AGENT OR BROKER

Property Quote

Page 4

Quote Number

0048030B

Date Quoted

January 12, 2023

Policy Level Coverage Information Section

All locations, all buildings unless indicated elsewhere.

All Commercial Property coverages on this policy are subject to these terms unless specifically changed.

5%	Hurricane Deductible
\$25,000	Minimum Deductible Per Occurrence
\$25,000	All Other Wind Deductible Per Occurrence
Ordinance or Law	Full A, 5% B and C combined
\$5,000 sublimit/\$25,000 annual aggregate	Water Back-Up / Sump Overflow
\$5,000	Equipment Breakdown Deductible
	ACV APPLIES TO ROOFS PER FORM CP1036(10-12) Bldgs
	1-2-3-5-13-16-18-19

Waived	Coinsurance
5,000	AOP Deductible
Special Form	

All limits and deductibles will apply to the perils of windstorm on a "per-building" basis unless otherwise specified. All limits are valued at replacement cost unless otherwise specified.

Sigma Underwriting Managers

4000 Hollywood Blvd., Suite 350 North Tower, Hollywood, FL 33021 (954) 983-2700

Date/Time Quoted 1/12/2023 11:45:05 AM

Surplus Lines Coverage - Non Admitted Carrier

This proposal, including all coverage's offered herein is offered on a Surplus Lines basis by a NON-ADMITTED carrier. Non-Admitted carriers are not protected by state guaranty funds which offer limited protection should the insurer become insolvent.

Line	Rate	Amount
1-150	30%	1-150
1-151	15%	1-151
1-152	10%	1-152
1-153	5%	1-153
1-154	2%	1-154
1-155	1%	1-155
1-156	0%	1-156
1-157	0%	1-157
1-158	0%	1-158
1-159	0%	1-159
1-160	0%	1-160

Minimum Earned Premium



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the:
**Commercial Property Coverage Part
Common Policy Conditions**

The following is added, and to the extent permitted by law, supersedes any provision to the contrary with respect to premium refund:

If this policy is cancelled, we will send the first Named Insured any premium refund due, subject to the following:

- A. If we cancel, the refund will be calculated on a pro-rata basis.**
- B. If the first Named Insured cancels and the policy was in force at any time during the period of June 1st to November 30th, the amount of premium refund due is the annual premium times the Unearned Factor listed below:**

Days Policy in Force	Unearned Factor
1-180	20%
181-210	15%
211-240	10%
241-270	7.5%
271-300	5.0%
301-330	2.5%
331 or more	0%

- C. If the First Named Insured cancels and the policy was not in force at any time between June 1st and November 30th, then the premium refund will be equal to 90% of the pro rata unearned premium as of the effective date of cancellation subject to a minimum earned premium of 25% of the annual premium.**
- D. If this policy has been extended beyond the end of the policy period and the policy is cancelled at any time during such extended policy period, there will be no premium refund.**

All other terms, conditions, provisions and exclusions of this policy remain the same.

Florida Surcharge and Assessment Fees

Please be advised that any quote issued by our office may be subject to any surcharges or fees implemented by Florida Insurance regulatory offices.

We reserve the right to amend our quote(s) to you if any regulatory surcharge is implemented after we issue a quote and is effective at the time of your bind request.

Assessment Statement ver1.0 12/14/2006



ZURICH

THIS DISCLOSURE DOES NOT GRANT ANY COVERAGE OR CHANGE THE TERMS AND CONDITIONS OF ANY COVERAGE UNDER ANY POLICY.

DISCLOSURE OF IMPORTANT INFORMATION RELATING TO TERRORISM RISK INSURANCE ACT

SCHEDULE*

Premium attributable to risk of loss from certified acts of terrorism for lines of insurance subject to TRIA:

\$2,523.00

*Any information required to complete this Schedule, if not shown above, will be shown in the quote or proposal.

A. Disclosure of Premium

In accordance with the federal Terrorism Risk Insurance Act ("TRIA"), as amended, we are required to provide you with a notice disclosing the portion of your premium, if any, attributable to the risk of loss from terrorist acts certified under that Act for lines subject to TRIA. That portion of premium attributable is shown in the Schedule above. The premium shown in the Schedule above is subject to adjustment upon premium audit, if applicable.

B. Disclosure of Federal Participation in Payment of Terrorism Losses

You should know that where coverage is provided by this policy for losses resulting from certified acts of terrorism, the United States Government may pay up to 80% of insured losses exceeding the statutorily established deductible paid by the insurance company providing the coverage.

C. Disclosure of \$100 Billion Cap on All Insurer and Federal Obligations

If aggregate insured losses attributable to terrorist acts certified under TRIA exceed \$100 billion in a calendar year (January 1 through December 31) and an insurer has met its deductible under the program, that insurer shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of Treasury.

D. Availability

As required by TRIA, we have made available to you for lines subject to TRIA coverage for losses resulting from acts of terrorism certified under TRIA with terms, amounts and limitations that do not differ materially from those for losses arising from events other than acts of terrorism.

E. Definition of Act of Terrorism under TRIA

TRIA defines "act of terrorism" as any act that is certified by the Secretary of the Treasury, in accordance with the provisions of the federal Terrorism Risk Insurance Act ("TRIA"), to be an act of terrorism. The Terrorism Risk Insurance Act provides that the Secretary of Treasury shall certify an act of terrorism:

1. To be an act of terrorism;
2. To be a violent act or an act that is dangerous to human life, property or infrastructure;
3. To have resulted in damage within the United States, or outside of the United States in the case of an air carrier (as defined in section 40102 of Title 49, United States Code) or a United States flag vessel (or a vessel based principally in the United States, on which United States income tax is paid and whose insurance coverage is subject to regulation in the United States), or the premises of a United States mission; and
4. To have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

U-GU-632-E CW (01/20)

No act may be certified as an "act of terrorism" if the act is committed as part of the course of a war declared by Congress (except for workers' compensation) or if losses resulting from the act, in the aggregate for insurance subject to TRIA, do not exceed \$5,000,000.

ZURICH

Declaration of Terrorism Coverage

The Terrorism Risk Insurance Act of 2005 indicates that you are provided the opportunity to obtain coverage for certified acts of terrorism as defined by that act. To obtain that coverage, you must first return the premium amount on the notification you received informing you of the availability of coverage. You may decline this coverage for any or all of the lines of business shown below.

To decline coverage, mark the box (X) in front of the line of business; sign and return this form and return to us.

- Property
- General Liability
- Product/Completed Operations
- Automobile
- Marine
- All lines (checked if the box is checked, there is no need to check any other)

Sign and return this form, or not, by the required premium will result in an endorsement to your policy excluding coverage for certified acts of terrorism.

Signature

Date



Declination of Terrorism Coverage

The Terrorism Risk Insurance Act of 2002 mandates that you be provided the opportunity to obtain coverage for certified acts of terrorism as defined by that act. To obtain that coverage, you must remit the premium specified on the notification you received informing you of the availability of coverage. You may decline this coverage for any or all of the lines of business shown below.

To decline coverage, mark the box (X) in front of the line of business, sign and date this form, and return to us.

- Property
- General Liability
- Inland Marine
- All lines rejected (if this box is checked, there is no need to check any other)

Signing and returning this form, or not paying the required premium, will result in an endorsement to your policy excluding coverage for certified acts of terrorism.

Policy Signature

Date

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LIMITATIONS ON COVERAGE FOR ROOF SURFACING

This endorsement modifies insurance provided under the following:

- BUILDERS RISK COVERAGE FORM
- BUILDING AND PERSONAL PROPERTY COVERAGE FORM
- CONDOMINIUM ASSOCIATION COVERAGE FORM
- CONDOMINIUM COMMERCIAL UNIT-OWNERS COVERAGE FORM
- STANDARD PROPERTY POLICY

SCHEDULE

Premises Number	Building Number	Indicate Applicability (Paragraph A. and/or Paragraph B.)

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. The following applies with respect to loss or damage by a **Covered Cause of Loss (including wind and hail if covered)** to a building or structure identified in the Schedule as being subject to this Paragraph **A.**:

Replacement Cost coverage (if otherwise applicable to such property) does not apply to roof surfacing. Instead, we will determine the value of roof surfacing at actual cash value as of the time of loss or damage.

B. The following applies with respect to loss or damage by **wind and/or hail** to a building or structure identified in the Schedule as being subject to this Paragraph **B.**:

We will not pay for cosmetic damage to roof surfacing caused by wind and/or hail. For the purpose of this endorsement, cosmetic damage means that the wind and/or hail caused marring, pitting or other superficial damage that altered the appearance of the roof surfacing, but such damage does not prevent the roof from continuing to function as a barrier to entrance of the elements to the same extent as it did before the cosmetic damage occurred.

C. For the purpose of this endorsement, roof surfacing refers to the shingles, tiles, cladding, metal or synthetic sheeting or similar materials covering the roof and includes all materials used in securing the roof surface and all materials applied to or under the roof surface for moisture protection, as well as roof flashing.

CONFIRMATION OF NO PRIOR OR EXISTING DAMAGE

I confirm that the property to be covered suffered no structural damage and/or any and all damages as a result from (Storm Name: _____) or any other source have been fully repaired. I understand that in any event, there is no coverage in the policy applied for, for any pre-existing damage and that it excludes any and all direct and indirect damage that may have been caused by any prior loss including, but not limited to (the above named event) regardless of when this damage may be discovered.

I recognize that the insurance company relies on the accuracy of this statement in determining the acceptability of my application and I certify that I have personally inspected the property or it was inspected by a certified contractor, and I am able to warrant that all the information contained in this statement is true and accurate as of the date of the signing below. I offer this statement to the insurance company as an inducement to write my insurance and understand that they would not write coverage without this statement certifying that there is no prior or existing damage.

Insured: (Must be an officer of the corporation)

Date:

Mission Lakes At Oakridge Condominium Association, Inc.		Building		14,808,600.00		Contents		14,808,600.00		Business Income/Rental Income		TIV		14,808,600.00	
Location	Building	Description	Street Address	City	State	Zip	County	Construction	Year Built	Property Value	Personal Property Value	BI/Rental Income Value	TIV		
1	1	Building	3005-3009 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2006	601,400.00	-	-	601,400.00		
1	2	Building	3015-3019 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2006	601,400.00	-	-	601,400.00		
1	3	Building	3014-3018 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2006	749,500.00	-	-	749,500.00		
1	4	Building	3006-3008 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2007	570,600.00	-	-	570,600.00		
1	5	Building	2995-2997 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2007	409,000.00	-	-	409,000.00		
1	6	Building	2984-2988 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2006	749,500.00	-	-	749,500.00		
1	7	Building	2985-2989 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2009	601,400.00	-	-	601,400.00		
1	8	Building	2974-2978 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2012	711,700.00	-	-	711,700.00		
1	9	Building	2975-2979 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2007	627,900.00	-	-	627,900.00		
1	10	Building	2964-2968 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2007	749,500.00	-	-	749,500.00		
1	11	Building	2965-2969 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2012	601,400.00	-	-	601,400.00		
1	12	Building	2954-2958 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2012	627,900.00	-	-	627,900.00		
1	13	Building	2955-2959 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2009	627,900.00	-	-	627,900.00		
1	14	Building	2944-2948 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2012	749,500.00	-	-	749,500.00		
1	15	Building	2945-2949 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2011	749,500.00	-	-	749,500.00		
1	16	Building	2934-2938 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2007	627,900.00	-	-	627,900.00		
1	17	Building	2935-2939 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2013	749,500.00	-	-	749,500.00		
1	18	Building	2924-2928 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2013	749,500.00	-	-	749,500.00		
1	19	Building	2919-2923 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2011	745,700.00	-	-	745,700.00		
1	20	Building	2914-2918 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2012	749,500.00	-	-	749,500.00		
1	21	Building	2915-2919 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2012	749,500.00	-	-	749,500.00		
1	22	Building	2904-2908 Mission Lakes Dr.	Lakeland	FL	33803	Polk	CN2 - JM (2)	2009	627,900.00	-	-	627,900.00		
1	23	Perimeter fence	2904-3019 Mission Lakes Dr	Lakeland	FL	33803	Polk	18C - Outdoor Property - Metal (4)	2009	14,000.00	-	-	14,000.00		
1	24	Gate Entry System	2904-3019 Mission Lakes Dr	Lakeland	FL	33803	Polk	18C - Outdoor Property - Metal (4)	2007	42,500.00	-	-	42,500.00		
1	25	Mailbox Stations	2904-3019 Mission Lakes Dr	Lakeland	FL	33803	Polk	13C - Outdoor Property Concrete (3)	2006	12,500.00	-	-	12,500.00		
1	26	Pond Aerator	2904-3019 Mission Lakes Dr	Lakeland	FL	33803	Polk	18C - Outdoor Property - Metal (4)	2006	6,000.00	-	-	6,000.00		
1	27	Irrigation pump	2904-3019 Mission Lakes Dr	Lakeland	FL	33803	Polk	18C - Outdoor Property - Metal (4)	2006	6,000.00	-	-	6,000.00		

