CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY): 10/28/2026

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.

PRODUCER
Arthur J. Gallagher Risk Management Services, LLC
2255 Glades Rd Ste 240W
Boca Raton FL 33431

License#: 0D69293

CONTACT NAME: Certificates Department
PHONE (A/C, No, Ext): 561-922-6924 **FAX (A/C, No):**
E-MAIL ADDRESS: certrequests@ajg.com
PRODUCER CUSTOMER ID: RIVETER-07

INSURED
Riverside Terrace Condo Inc.
The Wright Community Mgmt.
1079 Shotgun Rd
Sunrise FL 33326

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A :	Slide Insurance Company	17227
INSURER B :	Philadelphia Indemnity Insurance Company	18058
INSURER C :	American Bankers Insurance Company of FL	10111
INSURER D :		
INSURER E :		
INSURER F :		

COVERAGES **CERTIFICATE NUMBER:** 18770599 **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
See Remarks

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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
A	X **PROPERTY**	CPFL 0000541-01	8/28/2026	8/28/2027	X BUILDING	$ 10,523,417
	CAUSES OF LOSS / DEDUCTIBLES				PERSONAL PROPERTY	$
	BASIC / BUILDING				BUSINESS INCOME	$
	BROAD / CONTENTS				EXTRA EXPENSE	$
	X SPECIAL				RENTAL VALUE	$
	EARTHQUAKE				BLANKET BUILDING	$
	WIND				BLANKET PERS PROP	$
	FLOOD				BLANKET BLDG & PP	$
						$
						$
	INLAND MARINE	TYPE OF POLICY				$
	CAUSES OF LOSS					$
	NAMED PERILS	POLICY NUMBER				$
						$
B	X **CRIME**	PCAC007499-0819	8/28/2026	8/28/2027	X See Remarks	$ See Remarks
	TYPE OF POLICY					$
	CRIME					$
	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					$
						$
C	FLOOD	7800926607	10/25/2026	10/25/2027	X See Remarks	$ See Remarks
						$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Residential Condominium Association 41 Units

Important Notes for Lenders:
1. A checklist of coverage will not be provided as we are unable to provide anything other than a Certificate of Liability and Certificate of Property.
2. Replacement Cost Value/Replacement Cost Estimate or Appraisal will not be provided to third parties as we are unable to provide anything other than a
See Attached...

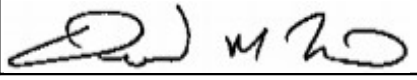
CERTIFICATE HOLDER

Proof of Insurance

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.

AUTHORIZED REPRESENTATIVE



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AGENCY CUSTOMER ID: RIVETER-07

LOC #:

ADDITIONAL REMARKS SCHEDULE

AGENCY	NAMED INSURED
Arthur J. Gallagher Risk Management Services, LLC	Riverside Terrace Condo Inc. The Wright Community Mgmt. 1079 Shotgun Rd Sunrise FL 33326
POLICY NUMBER	
CARRIER / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 24 **FORM TITLE:** CERTIFICATE OF PROPERTY INSURANCE

SPECIAL CONDITIONS:

Certificate of Liability and Certificate of Property.
3. Values are based upon most recent appraisal on file.
4. Coverage for the interior of the unit is NOT included. The Unit Owners are responsible for purchasing their own H06 policy.
5. Any cancellation notices will be sent to the association as they are the insured. The amount of time would be based upon the reason for cancellation (i.e., 10 days non-payment; 45 days non-renewal, etc.).
6. Lenders of unit owners cannot be added as a loss payee to the association policies as the policy covers common areas.
7. Property Manager is considered an Employee by definition of Crime Policy. Therefore, covered under this policy while conducting business for the insured association.
8. Please carefully read all pages to this Certificate of Insurance, specifically, the additional wording sections. If there are additional questions, please email your questions to certrequests@ajg.com as NO information will be provided over the phone.

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Riverside Terrace Condominium

Property / Hazard Schedule

Insurance Carrier: Slide Insurance Company
Policy Number: CPFL 0000541-01
Policy Period: Effective Date: 8/28/2026 Expiration Date: 8/28/2027

[X] Replacement Cost [X] Special

Additional Wording: Windstorm / Hail INCLUDED
Equipment Breakdown Included
Calendar Year Hurricane Percentage Deductible: 3%

		Limits			
Building	Location	Building	Contents	# Units	AOP Deductible
1	1601 SW 120th Ter Pembroke Pines FL 33025-3	$138,216		41	$1,000
	1601 SW 120th Ter Pembroke Pines FL 33025-3	$80,800	$0	Pool and Equipment	$10,000

CRIME

Insurance Carrier: Philadelphia Indemnity Insurance Company
Policy Number: PCAC007499-0819
Policy Period: Effective Date: 8/28/2026 Expiration Date: 8/28/2027

Insuring Agreements	Limit	Deductible
Employee Theft & Client Property	$250,000	$250
ERISA Fidelity	$250,000	$0
Forgery or Alteration	$25,000	$250
Computer Fraud & Funds Transfer Fraud	$250,000	$250
Fraudulent Inducement	$25,000	$1,000
Money Orders & Counterfeit Paper Currency	$25,000	$250

FLOOD

Insurance Carrier: Assurant P&C Group
Policy Number: 7800926607
Policy Period: Effective Date: 10/25/2026 Expiration Date: 10/25/2027

[X] Replacement Cost [X] RCBAP

Additional Wording: This Flood covers the master condominium association, its structures and common areas
Flood Zone: AE

		Limits			
Building	Location	Building	Contents	# Units	Deductible
1	615 N Riverside Dr, Pompano Beach FL	$10,250,000	$100,000	41	$2,000

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ASSURANT®

American Bankers Insurance Company of Florida
Scottsdale, AZ
Renewal Flood Insurance Policy Declarations

This Declarations Page is part of your Policy.

Policy Term: 10/25/2026 (12:01 a.m.) to 10/25/2027 (12:01 a.m.)

NAIC: 10111

Policy Number: 7800926607

Named Insured and Mailing Address:
RIVERSIDE TERRACE CONDO INC
1079 SHOTGUN RD
C/O NEXTGEN MANAGEMENT
SUNRISE, FL 33326-1911

Producer Number: 70005-00001-000

Premium Payor: INSURED

Property Location:
615 N RIVERSIDE DR
POMPANO BEACH, FL 33062

For Service Please Contact:
ARTHUR J GALLAGHER AND CO
2255 GLADES RD STE 240W
AJG RMS LLC
BOCA RATON, FL 33431-7391
800-488-3003

First Mortgagee / Lender Name:

Loan Number:

Second Mortgagee / Lender Name:

Loan Number:

Other / Loss Payee:

Loan Number:

LOCATION AND PROPERTY INFORMATION

Date of Construction: 06/01/1970
Building Occupancy: Residential Condo Building
Method Used to Determine First Floor Height: FEMA determined
Building Description: Entire Residential Condo Building
Property Description: ELEVATED WITH ENCLOSURE ON POSTS, PILES OR PIERS, THREE OR MORE FLOORS

Number Of Units: 41
Primary Residence: No
Prior NFIP Claims: 0 claim(s)
First Floor Height: 1.00 ft
Replacement Cost: $ 13,126,600

Your property's NFIP flood claims history can affect your premium. Prior Claims counted are from April 1, 2023 and after.

COVERAGE AND PREMIUM INFORMATION

Rate Category: FEMA Rating Engine

Coverage Type	Coverage Limit	Deductible		Premium
Building	$ 10,250,000	$ 2,000		$ 18,212.00
Contents	$ 100,000	$ 2,000		$ 748.00
			Increased Cost of Compliance:	$ 75.00
Coinsurance penalty may apply.			Community Rating System Discount:	$ -3,768.00
See your Policy Form for Details.			***Full Risk Premium Excluding Fees and Surcharges:***	$ 15,267.00
STATUTORY DISCOUNTS				$ 0.00
			Discounted Premium:	$ 15,267.00
FEES AND SURCHARGES			Reserve Fund Assessment:	$ 2,748.00
			Homeowner Flood Insurance Affordability Act of 2014 (HFIAA) Surcharge:	$ 250.00
			Federal Policy Fee:	$ 1,350.00
TOTAL PREMIUM, DISCOUNTS, FEES AND SURCHARGES PAID				$ 19,615.00

Visit FLOODSMART.GOV/PREMIUMCOSTS for more information about how premiums are calculated.

Coverage limitations may apply. See your NFIP RCBAP Form for details.
It is important to make sure that your policy information is accurate to prevent delays in claim handling. Contact your insurance agent or company to make changes to your policy.

American Bankers Insurance Company of Florida
P.O. Box 4276, Clinton, IA 52733-4276

ARTHUR J GALLAGHER AND CO
2255 GLADES RD STE 240W
AJG RMS LLC
BOCA RATON FL 334317391

