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Phone: 321-FL COAST (321-352-6278)

#### Coquina Key Subdivision Homeowners' Association, Inc.

#### **NOTICE OF 2024 ANNUAL MEMBERSHIP MEETING**

Notice is given that the Coquina Key Subdivision Homeowners' Association Inc., will hold their Annual. Membership Meeting as follows:

Date: January 6, 2024

**Time:** 10:00AM

Place: Ormond Beach Public Library

30 South Beach Street Ormond Beach, FL 32174

#### **Proposed Agenda:**

1. Calling of the Roll

- 2. Certifying of Proxies for Quorum
- 3. Proof of Notice of Meeting
- 4. Reading of 2023 Annual Members' Meeting minutes
- 5. Report of Officers
- 6. Report of Committees
- 7. Unfinished business
- 8. New Business
  - Vote on proposal for Spectrum reserve fund
- 9. Self-Nominations from the floor and via video for 2024 HOA Board of Directors.
- 10. Candidates may speak for a maximum of five minutes.
- 11. Determination if election is necessary (Minimum of 3 or maximum of 9 candidates. If there are more than 9 candidates an election is required.)
- 12. Election Results
- 13. Announcement of names of the 2024 HOA Board of Directors
- 14. Adjournment

The affairs and property of this association shall be managed and governed by a Board of Directors composed of not less than three (3) nor more than nine (9) persons. The Directors shall be elected by the voting membership via written ballot at the annual meetings of the membership.

**PROXIES:** If you are unable to attend the annual meeting, please submit your proxy so that we may establish a quorum at the meeting. Return the proxy in the proxy envelope provided. Proxies may also be emailed to Amoore@FLCoastMgt.com. If you have any questions, please contact Ashley Moore at (321) 352-6278 or by email Amoore@FLCoastMgt.com.

Sincerely,

Ashley Moore, LCAM, CMCA

& Your Board of Directors of Coquina Key Subdivision Homeowners' Association, Inc.

#### **Enclosures:**

Annual & Organizational Meeting Agendas, 2024 Proxy, Notice of Intent to be a Board Candidate, Owner Information Sheet, Voter Certification Form

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### Coquina Key Homeowners Association Limited Proxy Form

L			
.,	(print your	r name)	
	the owner of lot #	hereby appoint	
	(print the name o	of your appointee)	
-	oxy holder name is left blank, th dance quorum at the annual m	his proxy will count only toward reaching the neeting.	9
6, 2024 at 10:00 AM to 12:00 F	M. Ormond Beach Library, 30 S. Beach me to the same extent that I would if p	Coquina Key Homeowners Association to be held on S ch St., Ormond Beach, FL 32174. The proxy holder n personally present, except that my proxy holder's auth	named above has
1Please acc	ept this proxy to count only	ly towards quorum at the annual mee	eting.
	cluding election of the boa	t my vote for matters which properly o ard of directors. The proxy will also co	
 Date			
Signature of Owner			
Only Designated Voter	on file can sign this form if F	Property <u>has more than one</u> owner.	
1/06/2024 ANNUAL ADJOURNMENT. II	. MEETING FOR WHICH N NO EVENT IS THE PR	T OWNER & IS VALID ONLY FO H IT IS GIVEN & ANY LAWFUL ROXY VALID FOR MORE THAN I G FOR WHICH IT WAS GIVEN.	

#### SUBSTITUTION OF PROXY

The undersigned, appointed as proxy above, forth above.	, does hereby designate	_to substitute for me in the proxy set
Date:	PROXY HOLDER:	

(This is revocable by the unit owner and proxy shall not be valid for a period longer than ninety (90) days after the date of the first meeting for which it was given.)

#### **Coquina Key Home Owners Association**

# \*OPTIONAL- DOES NOT PRECLUDE YOU FROM SELF NOMINATION\* NOTICE OF INTENT TO BE A CANDIDATE

### YOU WILL STILL NEED TO NOMINATE YOURSELF FROM THE FLOOR OR VIA VIDEO CONFERENCE

l,	, hereby intend to place my name in nomination as a candidate for the	
	ina Key Subdivision Homeowners' Assoc the Ormond Beach Public Library, 30 South E	ciation for the Annual Election to take place on Saturday, Beach Street, Ormond Beach, FL 32174.
	le for the accuracy of the information containe ght to vote in the jurisdiction of my personal re	d in the Information Statement. I certify that I am neither a esidence.
Signed:	Date:	
On-site Address:		
Mailing Address (If Different):		
Phone:	Email:	
	CANDIDATE INFORM	ATION
Information may be included I	pelow or provided on a separate 8 ½" x 1	1" sheet.
PERSONAL BACKGROUND		
PRIOR ASSOCIATION EXPE	ERIENCE	
COMMENTS ABOUT BOARI	D CANDIDACY	

#### Coquina Key Subdivision Homeowners' Association, Inc.

#### CERTIFICATE OF APPOINTMENT OF VOTING REPRESENTATIVE

TO THE SECRETARY OF

HIS IS TO CERTIFY that the undersigned, constituting all of the record owners of
oquina Key Subdivision Homeowners Association, Inc, Address:
in the Coquina Key Subdivision Homeowners ssociation, Inc, Inc., have designated:
(Name of Voting Representative)
s their representative to cast all votes and to express all approvals that such owners may be entitled cast or express at all meetings of the membership of the Association and for all other purposes ovided by the Association By-Laws, Articles of Incorporation, and Declaration of Covenants, and Italian and Restrictions of the Coquina Key Subdivision Homeowners Association, Inc.  Inis certificate is made pursuant to the Association By-Laws and the Declaration of Covenants, and Italian and Restrictions of the Coquina Key Subdivision Homeowners Association, Inc. and shall the voke all prior certificates and be valid until revoked by a subsequent certificate.
ated theday of, 202_
r:oper:ty-OwAer-Signature
roperty Owner Signature
roperty Owner Signature

NOTE: This form is not a proxy and should not be used as such. Please be sure to designate one of the joint owners of the property as the Voting Representative, NOT a third person. THIS ONLY NEEDS TO BE FILLED OUT IF YOUR HOUSEHOLD HAD NOT DONE SO PREVIOUSLY. ONLY ONE REPRESENTATIVE PER HOUSEHOLD.



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## Coquina Key Subdivision Homeowners' Association, Inc. Owner Information Contact Update Form

Property Address	_	Unit#			
Please complete the form below by PRINTING the requested information, sign and date and					
mail, fax, or email to the address above. Information	on confidential: Y or N				
Ho eowner Name(s)					
Resident Address	Unit#				
Mailing Address(if different)					
Home Telephone Number					
Work Telephone Number					
E-mail	Cell Phone				
Near,est Contact (relative, friend, neighbor) with a	key (in case of emergency)				
Name	Phone				
Mailing Address					
Nearest Relative (in case of emergency)					
Name	Phone				
Mailing Address					
TENANT(s)					
Home Telephone Number					
Work Telephone Number	Fax#				
E-mailC					
Number of Person(s) occupying unit Number of Pe	ets (and Type)				
Adult(s)Dogs	Cats Other				
Vehicle(s) Make/Yr Model Color Tag Number					
Please Sign and Date Below:					
Owner Signature		Date			

Spouse/Co-Owner Signature	Date