

TARPON HIGHLANDS AT LAKE TARPON CLUB I

NOTICE OF 2026 BUDGET ADOPTION MEETING

To All TARPON HIGHLANDS AT LAKE TARPON CLUB I MEMBERS:

The **BUDGET MEETING** of **TARPON HIGHLANDS AT LAKE TARPON CLUB I** will be held on the following DATE, TIME and LOCATION:

- **DATE / TIME: Monday, December 8, 2025 at 6:00 PM**
- **LOCATION: Commodore Club House**

This Budget Meeting of the Association will be held for the purpose of final approval and adoption of the 2026 Budget, as well as the establishment of the annual assessment and/or maintenance fee(s) schedule for the 2026 calendar year. We have enclosed a copy of the 2026 Proposed Budget for your review.

Agenda items are as follows:

- 1. Call to Order**
- 2. Certify Quorum of Board and Membership**
- 3. Proof of Notice of the Meeting**
- 4. Vote to Roll Over Excess Funds**
- 5. Board Approval of 2026 Annual Budget**
- 6. Adjournment**

Mailed: November 24, 2025

BY ORDER OF THE BOARD OF DIRECTOR
KRISTEN MARCHESE, LCAM

PROXY WILL ALSO BE USED TO ESTABLISH A QUORUM

TARPON HIGHLANDS AT LAKE TARPON CLUB I
PROXY

The undersigned owner(s) or designated vote of Address _____ in **TARPON HIGHLANDS AT LAKE TARPON CLUB I** hereby appoints the **Secretary** of the Association or _____ as my proxyholder to **ATTEND the Budget Meeting of Tarpon Highlands at Lake Tarpon Club I** to be held on **Monday, December 8, 2025 at 6:00 PM at Commodore Club House.**

The proxyholder named above has the authority to vote and act for me to the same extent that I would, if personally present, with power of substitution, including the establishment of a quorum, in all matters before the membership, except that my proxy- holder's authority is limited as indicated below:

GENERAL POWERS: You may choose to grant general powers, limited powers or both. Check "General Powers" if you want your proxyholder to vote on other issues which might come up at the meeting and for which a limited proxy is not required.

_____ I authorize and instruct my proxyholder to use his or her best judgement on all other matters which properly come before the meeting and for which a general proxy may be used.

LIMITED POWERS: For your vote to be counted on the following issues, you must indicate your preference in the blank(s) provided below.

_____ I specifically authorize and instruct my proxyholder to cast my vote in reference to the following matters as I have indicated below:

1. Roll Over Excess Funds:

Do you want to roll over any excess operating funds in the **2025** calendar year into the **2026** budget, as a constructive return of capital to the membership consistent with IRS rulings 70-604.

_____ **YES** _____ **NO**
(Board Recommended)

Signature of Owner or Designated Voter:

Signature of Co-Owner:

Date:

Print Name:

Print Name:

Date:

SUBSTITUTION OF PROXYHOLDER

The undersigned, appointed as proxyholder above, designates _____

To substitute for me in voting the proxy set forth above.

(Print Name)

Dated: _____

_____ (Signature of Proxyholder)

This proxy is revocable by the unit owner and is valid only for the meeting for which it is given and any lawful adjournment. In no event is the proxy valid for more than ninety (90) days from the date of the original meeting for which it was given.

VOTING BY PROXY

If you are unable to attend the Membership Meeting and wish to vote on all issues/items by proxy, please note the following information about proxies:

1. A proxy may be used for the purpose of establishing a quorum, and for appointing another person to vote for you in the event that you might not be able to attend the meeting.
2. The proxy must be signed by the owner or voting representative of the unit to be valid.
3. By selecting "General Powers" on the Proxy, you authorize and instruct your proxyholder to use his/her best judgement on all matters which properly come before the meeting and for which a general power may be used, including but not limited to the Election of Directors.
4. By selecting "Limited Powers", your proxyholder may only cast your vote as you specifically direct. For your vote to be counted on that issue, you must indicate "yes" or "no" on the question on the proxy.
5. The proxy should be submitted to the Association prior to the scheduled time of the meeting. **The proxy can be submitted, either by you or your proxy, by scanning and emailing it to kmarchese@ameritechmail.com , faxing to 727-723-1101, or mailing the proxy to Ameri-Tech Community Management Partners, LLC., 5434 Grand Blvd., New Port Richey, FL 34652.** You are encouraged to submit your proxy in advance of the meeting, in order to avoid delay in registration.
6. If you appoint a proxy and later decide you will be able to attend the meeting in person, you may withdraw your proxy when you register at the meeting.
7. A proxy may be revoked in writing or superseded by a later proxy to another person. It may be assigned (substituted) by the person designated on the proxy to a third person, if the person you designate as a proxy decides that he or she will be unable to attend the meeting.

The Association will incur additional administrative costs if the meeting is rescheduled due to failing to achieve a quorum.

**AFFIDAVIT OF MAILING OR HAND DELIVERING
OF NOTICE TO UNIT OWNERS**

STATE OF FLORIDA

COUNTY OF PINELLAS

BEFORE ME, personally appeared **Kristen Marchese and Rita Merger** who after being duly sworn, deposes and says the **NOTICE of BUDGET MEETING of TARPON HIGHLANDS AT TARPON LAKE CLUB I to be held on Monday, December 8, 2025 at 6:00 PM at Commodore Club House** were mailed or hand delivered in accordance with applicable law. The budgets were mailed or hand delivered to each unit owner at the address last furnished to the Association, as such address appears on the books of the Association. (Copy Attached

TARPON HIGHLANDS AT TARPON LAKE CLUB I

BY: _____

Kristen Marchese, Community Manager

BY: _____

Rita Merger, Administrative Assistant

STATE OF FLORIDA
COUNTY OF PINELLA

Sworn to and subscribed before me this _____ day of _____, _____,

By **Kristen Marchese**, as Community Manager, and **Rita Merger**, as Administrative Assistant,
of **Tarpon Highlands at Tarpon Lake Club I**, a Florida not-for-profit corporation.

Personally Known ____ or

NOTARY PUBLIC – STATE OF FLORIDA

Produced Identification ____

Type Of Identification _____

Sign _____

Print _____

