



Jonathan Harbour Community Association, Inc.

LIMITED PROXY

The undersigned owner(s), or their voting Representatives, of Address _____ in JONATHAN HARBOUR COMMUNITY ASSOCIATION, INC., hereby appoints:

(Check one)

A) _____ The Secretary of the Association, on behalf of the Board of Directors, or
B) _____, _____ (If you check "B", write in the name of your Proxy), as my Proxy holder to attend the meeting of the members of the JONATHAN HARBOUR COMMUNITY ASSOCIATION, INC., to be held on March 17, 2025 at 11:00 A.M., at the Jonathan Harbour Clubhouse, located at 14562 Jonathan Harbour Drive, Fort Myers, FL 33908. The Proxy holder 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, except that my Proxy holder's authority is limited as indicated below:

THIS IS A LIMITED PROXY FOR THE ISSUE(S) LISTED BELOW. IT WILL BE USED AS A GENERAL PROXY ONLY TO ESTABLISH A QUORUM AND FOR VOTES ON PARLIAMENTARY AND PROCEDURAL ISSUES. FOR YOUR VOTE TO COUNT ON THE ISSUE(S) LISTED BELOW, YOU MUST PERSONALLY MARK YOUR PREFERENCE WHERE INDICATED. IF YOU DO NOT PERSONALLY VOTE ON THE ISSUE(S) LISTED BELOW, YOUR PROXY HOLDER WILL NOT HAVE THE AUTHORITY TO VOTE FOR YOU.

A. Vote to have a report of cash receipts and expenditures in lieu of a compiled financial statement for the 2025 fiscal year.

_____ In Favor _____ Opposed

B. Should the Members authorize the Board to WAIVE funding of Reserves for the fiscal year 01/01/2025 - 12/31/2025?

WAIVING OF RESERVES, IN WHOLE OR IN PART, OR ALLOWING ALTERNATIVE USES OF EXISTING RESERVES MAY RESULT IN UNIT OWNER LIABILITY FOR PAYMENT OF UNANTICIPATED SPECIAL ASSESSMENTS REGARDING THOSE ITEMS.

_____ IN FAVOR _____ OPPOSED

Address: _____, Jonathan Harbour Dr. / Marina Cove Ln. / Tidewater Ln. (Circle Street)

Printed Name: _____

Signature: _____ Dated: ____ / ____ / ____

The undersigned ratify and confirm any and all acts and things that the proxy may do or cause to be done on the premises, whether at the meeting referred to above or at any change, adjournment, or continuation of it, and revoke all prior proxies previously executed. This limited proxy may be used only at the meeting for which it was given and may not be more than 90 days old.

SUBSTITUTION OF PROXY

The undersigned, who is the person named as proxy holder on the above proxy, does hereby designate _____ to act as substitute proxy holder to vote this proxy as indicated.

Date: ____ / ____ / ____ Signature of Proxy Holder: _____

c/o Florida Sunset Management
1520 Royal Palm Sq. Blvd. #360, Fort Myers FL 33919
239-454-3525
Email – Dominique@SunsetMgmt.com