SECOND NOTICE OF ANNUAL MEETING

To: ALL VICTORIA PALMS OF DUNEDIN CONDOMINIUM OWNERS,

The ANNUAL MEETING of **VICTORIA PALMS OF DUNEDIN CONDOMINIUM ASSOCIATION**, **INC.** will be held at the following DATE, TIME, and LOCATION:

DATE / TIME: WEDNESDAY, JUNE 25, 2025 AT 6:30 P.M.

• LOCATION: VICTORIA PALMS COMMUNITY CLUBHOUSE 700 LYNDHURST STREET, DUNEDIN, FL 34698

OR

JOIN ZOOM MEETING:

https://zoom.us/j/92644803788?pwd=6UIOc5Pe96ZbtUusPratmOdibMJZmP.1

Meeting ID: 926 4480 3788 Passcode: 912057

Enclosed with this notice is the Agenda for the Annual Meeting and a Proxy which will help establish a quorum and represent your vote on business that may arise. The Annual Meeting of the Association will be held for the purpose of an election and voting for directors, as well as conducting such other business as may lawfully be conducted.

Agenda items are as follows:

- 1. Call to Order
- 2. Appoint Chairperson to the Meeting
- 3. Proof of Notice of the Meeting
- 4. Certifying of Proxies & Establish Quorum
- 5. Read or Waive Minutes of Last Members' Meeting
- 6. Election of Directors
- 7. Reports of Officers & Committees
- 8. Unfinished Business
- 9. New Business
 - a. Open Forum
- 10. Adjournment

BY ORDER OF THE BOARD OF DIRECTORS ELLYSE VOSSELMANN, LCAM

BOARD OF DIRECTORS ORGANIZATIONAL MEETING

NOTICE is hereby given that the Board of Directors is holding an Organizational Meeting at the following DATE, TIME, and LOCATION:

DATE / TIME: WEDNESDAY, JUNE 25, 2025 AT 6:30 P.M.

• LOCATION: VICTORIA PALMS COMMUNITY CLUBHOUSE 700 LYNDHURST STREET, DUNEDIN, FL 34698

OR

JOIN ZOOM MEETING:

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Meeting ID: 926 4480 3788 Passcode: 912057

AGENDA

- 1. Call to Order
- 2. Appoint Chairperson of the Meeting
- 3. Appoint Officer Positions
 - (1) President; (2) Vice President; (3) Treasurer; (4) Secretary; (5) Director
- 4. Adjournment

ALL OWNERS ARE WELCOME TO ATTEND

BY ORDER OF THE BOARD OF DIRECTORS ELLYSE VOSSELMANN, LCAM

ANNUAL MEMBERSHIP MEETING Wednesday, June 25, 2025 at 6:30 p.m.

2025-26 BOARD OF DIRECTORS

Alphabetical Order (Last Name, First Name)

ANDERSON, DANIEL BY PROCLAMATION

BRANDT, WENDY BY PROCLAMATION

ELLISTON, JERI BY PROCLAMATION

HENNE-ROED, CHRIS BY PROCLAMATION

PROXY

(Proxy will be used to establish a Quorum)

The undersigned owner(s) or designated vot VICTORIA PALMS OF DUNEDIN CONDO Secretary of the Association or (fill in name), to attend the Annual Membership Meet Association, Inc. to be held on Wednesda Community Clubhouse, 700 Lyndhurst https://zoom.us/j/92644803788?pwd=6UIC92644803788; Passcode: 912057.	OMINIUM ASSOCIATION, INC. hereby as n ing of Victoria Palms of Dunedin C ny, June 25, 2025 at 6:30 p.m. at the V Street, Dunedin, Fl 34698 or join Zo	ny proxyholder Condominium ictoria Palms
The proxyholder named above has the authwould, if personally present, with power of sall matters before the membership, except below:	ubstitution, including the establishment of	of a quorum, in
GENERAL POWERS : Check "General Power which might come up at the meeting and for		on other issues
I authorize and instruct my proxyhol which properly come before the meeting and	der to use his or her best judgement on a d for which a general proxy may be used.	
Signature of Owner or Designated Voter:	Signature of Co-Owner:	Date:
Print Name:	Print Name:	Date:
SUBSTITUT	TION OF PROXYHOLDER	
The undersigned, appointed as proxyholder	above, designates	
To substitute for me in voting the proxy set f	forth above.	
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 you are not 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 proxy holder to use his/her best judgement on all matters which properly come before the meeting and for which a general power may be used.
- 4. The proxy should be submitted to the Association prior to the scheduled time of the meeting. The proxy can be submitted by faxing to 727-723-1101 or mailing to Ameri-Tech Community Management, Inc., 24701 US Hwy 19 N, Suite 102, Clearwater, FL 33763 in the enclosed "Proxy Return Envelope". You may also bring the proxy with you the night of the meeting. It is encouraged that you submit your proxy in advance of the meeting to avoid delays in registration.
- 5. 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.
- 6. 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

Please Return to Ameri-Tech Community Management, Inc. 24701 US Hwy 19 N, Suite 102, Clearwater, FL 33763 E-mail: evosselmann@ameritechmail.com – 727-726-8000 Ext 306

EMERGENCY CONTACT INFORMATION FOR OWNER OR TENANT

PROPERTY ADDRESS		UNIT	
Please complete the form below by PRINTI scan & email to Ameri-Tech Community M	NG the requested intanagement c/o Ellys	formation, sign & date and either ha e Vosselman.	nd deliver, mail, or
Homeowners Name(s)			5
Resident Address		Unit	
Mailing Address (if different)			<u></u>
Home Telephone Number			=
Work Telephone Number		Text Cell Phone: YES or NO)
Email		_ Cell #	8
Nearest Contact (relative, friend, neighbor)	with a key (in case o	of emergency)	
Name	Phone _		
Mailing Address			
Nearest Relative (in case of emergency)			
Name	Phone _		,
Mailing Address			
ENANT(s), if applicable			- s
Home Telephone Number			_
Work Telephone Number		Text Cell Phone: YES or	NO
E-mail		Cell #	-
Number of Person(s) occupying unit		Number of Pets (and type) (If p	permitted by Docs)
Adults(s) Children		Dogs Cats Other	
Vehicle(s) Make/Yr Model		Color TAG Number	
PLEASE SIGN AND DATE BELOW:			
	Date Co	-Owner Signature (if applicable)	Date