

SAMPLE LIMITED PROXY FORM

The undersigned, owner(s) or designated voter of unit No. _____ in _____ (name) _____
Condominium, appoints

(PRINT NAME OF PROXYHOLDER)

or _____ (*Instructions to associations: Fill in the name or position of an officer or director who will serve as proxy holder.*) as my proxyholder to attend the meeting of the members of _____ (name) _____ Condominium Association, Inc., to be held ____ (date) ____, 20__, at ____ (time) ____, in _____ (place) ____, Florida. 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, except that my proxyholder'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 proxy to use his or her best judgment on all other matters which properly come before the meeting and for which a general power 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 INDICATED BELOW:

(Instructions to associations; List below the specific questions or issues to be voted on. *The following are only examples.*)

Financial Reporting Waiver

A. Do you want to provide for a lower level of year-end financial reporting than is required by § 718.111(13), Florida Statutes, for the next fiscal/calendar year? Currently, the Association is required to prepare a (list the level).

_____ YES _____ NO

If yes, vote for one of the board proposed options below: (The option with the most votes will be the one implemented.)

LIST OPTIONS HERE

Reserve Funding Waiver

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:

B. Do you want to provide for less than full funding of reserves than is required by § 718.112(2)(f), Florida Statutes, for the next fiscal/calendar year?

_____ YES _____ NO

If yes, vote for one of the board proposed options below: (The option with the most votes will be the one implemented.)

LIST OPTIONS HERE

DATE: _____
SIGNATURE(S) of OWNER(S) OR DESIGNATED VOTER

SUBSTITUTION OF PROXYHOLDER

The undersigned, appointed as proxyholder above, designates _____ to substitute for me in voting the proxy as set forth above. (print name)

Signature of proxy holder Date: _____

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.