

SEACREST SOUTHWEST PROPERTY MANAGEMENT

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NOTICE OF MEETING

TO: All Unit Owners

NOTICE is hereby given that the Annual Meeting of the members of **The Strand Homeowners' Association, Inc.**, will be held at the date, hour and place below noted:

DATE: March 28, 2024
HOUR: 1:00 p.m.
PLACE: The Strand Clubhouse
5840 Strand Blvd, Naples, FL 34110
PURPOSE: **2024 Annual Members Meeting**

The following members have submitted their names for candidacy to serve on the Board of Directors.

Mitchell Dario, Sherri Dorrill, Richard Galash, Carlos David Lee, George Merrell, Robert Polizzotto and Stephen Sturgis

In as much as there are seven (7) candidates for seven (7) positions open, they will automatically serve on the Board of Directors.

ANNUAL MEETING AGENDA

1. Calling of Roll & Certifying of Proxies
2. Proof of Notice of Meeting
3. Reading & Disposal of any Unapproved Minutes
4. Reports of Officers
5. Unfinished Business.
6. New Business
 - a. Announcement of Proxy Votes
7. Adjournment

Immediately following this meeting, the new Board will have an Organizational meeting to elect officers.

IF YOU CANNOT ATTEND THE MEETING IN PERSON, PLEASE COMPLETE AND RETURN THE ENCLOSED PROXY IN ORDER TO ENSURE A QUORUM.

ORGANIZATIONAL MEETING AGENDA

1. Call to Order by Chairperson
2. Certifying of Quorum
3. Election of Officers
4. Adjournment

LIMITED PROXY

The undersigned owners or the designated voter of Unit _____ in **The Strand Homeowners' Association, Inc.** appoints: ******(Check one)

_____ (a) Secretary, on behalf of the Board of Directors, or

_____ (b) _____ (if you check "b", write the name of your proxy holder.)

as my proxy holder* to attend the Annual Meeting of **The Strand Homeowners' Association, Inc., to be held March 28, 2024, at 1:00 p.m. at The Strand Clubhouse, 5840 Strand Blvd, Naples, FL 34110.** 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:

LIMITED POWERS FOR YOUR VOTE TO BE COUNTED ON THE FOLLOWING ISSUES, YOU MUST INDICATE YOUR PREFERENCES THE BLANK(S) PROVIDED BELOW.

I SPECIFICALLY AUTHORIZE AND INSTRUCT MY PROXYHOLDER TO CAST MY VOTE IN REFERENCE TO THE FOLLOWING MATTERS ONLY AS INDICATED BELOW:

1. Should the surplus of membership income, if any, after expenses for the fiscal year 2024 be carried over for the next fiscal budget year, 2025? (The board recommends a YES vote to avoid taxation of any surplus).

_____ YES

_____ NO

2. Should the annual requirement to have financial statements audited by a CPA at the end of 2024 be Waived? (Florida Statutes §720.303 (7)(a) requires Homeowners Association with total annual revenues of \$500,000 or more to prepare audited financial statements, unless the members vote to waive such requirement. If this requirement is waived, you will still be provided with year-end financial reports in accordance with Florida Statutes §720.303 (7)(d), prepared by the Association's management company. Please be advised that an Audit was done in 2020 on the 2019 financials. (The board recommends a YES vote to waive the audit).

_____ YES

_____ NO

DATED: _____, 2024

ALL OWNERS OF THE UNIT, OR THE DESIGNATED VOTER

SIGNATURE

PRINTED NAME

****Failure to check either (a) or (b), or if (b) is checked and failure to write in the name of your proxy holder, shall be deemed an appointment of the Secretary of the Association as your proxy holder**

SUBSTITUTION OF NOMINEE

The undersigned Proxy, who is the Proxyholder named on the above Proxy, does hereby designate _____ as the undersigned Proxy's substitute nominee, to act as Proxy as set forth in the foregoing Proxy.

Dated this _____ day of _____,

Proxy

PROXY MAY BE GIVEN ONLY TO ANOTHER VOTING MEMBER. EMAIL YOUR PROXY TO PROXY@SWPROPMGT.COM