

NOTICE

CLARCONA RESORT COMDOMINIUM
ASSOCIATION, INC.

REGULAR BOARD MEETING

**JANUARY 13, 2000
7:00 PM**

REC HALL

AGENDA: TO BE DETERMINED

CLARCONA RESORT CONDOMINIUM ASSOC., INC.
BOARD MEETING - JANUARY 13, 2000

AGENDA

- I. Call to order. Ken Prothero - President - 7:00 PM.
- II. Roll call.
- III. Reading/approval of minutes of Regular Board Meeting held November 11, 1999, Emergency Board Meeting held November 24, 1999, Board Organizational Meeting held December 9, 1999, Board Emergency Meeting held December 27, 1999, Manager - Office Procedures.
- IV. Officers Report.
 - a. President's Report
 - b. Treasurer's Report
- V. Committee Reports.
 - a. Activities - Jack Jordan
 - b. A.E.R.C.
 - c. Violations
 - d. Storm Shelter/Rec Hall
- VI. OLD BUSINESS:
 1. Committees:
 - a. Standing committees, special committees.
 - b. Number of people per committee. 3,5,7, etc.
 - c. Which committee will be served by what director.
 - d. Selecting Chairperson and secretary.
 - e. Appointing committee members.

Page Two

AGENDA - JANUARY 13, 2000

2. Water Problem 600 block, pictures. \$1,950.00
3. Mini-golf. Pictures. Need help estimating cost.
4. Storm Shelter/Rec Hall. Have to vote within next two months or we lose the state grant of \$100,000.00.
5. Gate procedures - security.

VII. NEW BUSINESS

1. Resolutions regarding employee and board of directors policy.
2. New homeowner and new renter information package.
3. Clear brush in 25 ft. buffer zone next to fence, west side of 1000 block.
4. Homeowners Forum.
5. Leaf pickup proposal.
6. Pool heating option. A study.
7. Workman's Comp. bill.
8. Taking home old records of minutes to review for resolution book
9. Permission to hire P/T Temp help for Condo Office

BOARD MEETING

January 13, 2000 7pm

Meeting called to order 7:05pm

Board members present were Adkison, Boxer, Bufalini, Cooper, Fox, Porter, Prothero, Schoen.

In the PRESIDENTS' REPORT, Mr. Prothero announced that :

1. The Manager has resigned - he wished her well and we will miss her.
2. Of the 12 applications received, 6 were acceptable. One is to be interviewed January 14, another January 17.
3. 85 water meters have been installed the cost of which to be covered in the Treasurers' report. The meters were randomly scattered. Mr. Prothero requested that all co-operate in order to meet guidelines presented to prevent further installation of meters.
4. Question - How did the word (of the water meters) get out ? Response - in the Jan. issue of the Why Not News.

TREASURERS' REPORT - Jesse Weaver :

Stated we are actually in good financial shape.

Copy of the budget as submitted attached.

A motion was made by Ms. Boxer to accept the treasurers report, seconded by Mr. Schoen.

A motion was made by Mr. Adkison to pay the Workman's Comp. bill by 1-15-2000 of \$ 2,016 per court order, seconded by Mr. Porter with unanimous approval as described in the attached report.

ACTIVITIES REPORT - Jack Jordan

1. Activities have been doing great with at least 1 large meal per week.
 - > Nearly 300 attended Thanksgiving dinner. 12 turkeys and 90-100 pounds of potatoes were cooked.
 - > Nearly 250 attended the Christmas dinner and consumed seven 18-20 pound hams.
 - > The New Years party was a huge success with 123 people attending and a collection to hold the band over was taken.
 - > Of the \$ 3,000 budget for recreation supplies, \$ 2,167 was spent, so activities is operating under budget.
 - > The entertainment budget was \$ 7,000 and \$ 7,000.38 was spent.
 - > There is a detailed report available for anyone who wants it.

STORM SHELTER / REC. HALL REPORT :

An explanation that if we are going to vote again on a new Rec. Hall / Storm Shelter that the vote must be completed by Feb. 21 to be eligible for the State grant of \$ 100,000.

A motion was made by Mr. Porter to have another vote on the Storm Shelter / Rec. Hall, seconded by Mr. Adkison with unanimous approval.

A motion by Mr. Porter to table agenda items 1-a to e under old business for a meeting to be held next week was seconded by Ms. Boxer with a unanimous approval.

> The agenda was :

1. Committees:

- a. Standing committees, special committees
- b. Number of people per committee - 3,5,7,etc.
- c. Which committee will be served by what director
- d. Selecting Chairperson and secretary
- e. Appointing committee members.

A motion by Mr. Porter to defer action on gate procedures was seconded by Ms. Fox with unanimous approval.

Concerning the water problem, a contractor has bid the entire street (400 feet) in the 600 block, but now 1/2 of the road to provide a gutter in the center of the street - 6 ft. as far as needed, at a cost of \$ 1950 to come out of reserves. Questions were asked about drainage and workmanship. Mr. Porter made a motion to accept the contract as per bid, seconded by Ms. Fox with unanimous approval. > Copy of the contract attached to the minutes.

When questioned about plugged storm drains, Mr. Cieslik explained they are completely cleaned 2 times per year.

An estimate and total cost of repairs of the mini-golf course is needed.

Mr. Prothero stated we need the Rec. Hall vote in approximately 6 weeks. Awards are to be announced Feb. 21-24. The other 4 parks are "in". The state firm chose 5 parks total. Some of the parks intended to "redo". We're the only one to go from scratch to build a complete new building.

The need of part time office help was discussed.

A motion was made by Mr. Porter to authorize the Manager or President to hire temporary help - to be covered by budgeted salary funds, seconded by Ms. Boxer with unanimous approval.

A motion was made by Mr. Porter to defer remaining business for the Thursday, January 20 meeting was seconded by Ms. Cooper with unanimous approval.

Motion to adjourn made by Mr. Porter, seconded by Ms. Fox.

Meeting adjourned 9:05pm

Respectfully Submitted



Mary Lou Weaver, Secretary

At the monthly board meeting, February 10, 2000 a motion was made by Ms. Boxer to accept the above minutes as corrected, seconded by Ms. Stemock, with unanimous approval. *MLW*

Attachment Regular Board Meeting
13 January 2000



NOV 12 1999

THE STATE OF FLORIDA
DEPARTMENT OF INSURANCE
DIVISION OF REHABILITATION AND LIQUIDATION

November 10, 1999

**COURT-ORDERED ASSESSMENT NOTICE AND INVOICE
FLORIDA EMPLOYERS SAFETY ASSOCIATION SELF INSURERS FUND**

The records of Florida Employers Safety Association Self Insurers Fund ("FESA") indicate that between 1990 and 1995 your business had workers' compensation insurance with FESA. In October 1996, FESA was placed into a bankruptcy type proceeding for insurance companies. The Circuit Court for the Second Judicial Circuit (Leon County, Tallahassee) appointed the Florida Department of Insurance to act as "Receiver" to wind up FESA's business.

Under Florida law and the assessable FESA insurance policy, all former policyholders of the self-insurance fund are responsible for the workers' compensation claims insured by FESA. At the direction of the circuit court, the Receiver has calculated the amount of FESA workers' compensation claims that have been paid since FESA was placed in bankruptcy and the amount required to finish paying outstanding FESA claims. Based on the total amount of FESA workers' compensation claims and other expenses authorized by law, the circuit court directed the Receiver to issue assessments to all former FESA members for their share of the amount necessary to pay workers' compensation claims against FESA. Your share of the assessment is based on the workers compensation premiums charged to you while insured by FESA compared to the total FESA premiums for the specific year.

Enclosed is your Assessment Invoice showing your share of the total assessment. The court has authorized a discount of 1/3rd of the assessment to each member who promptly pays the assessment. In order to receive the 1/3rd discount, you must pay the Discounted Assessment by January 15, 2000. In addition to checks, money orders, or wire transfers, the Receiver can accept payment by VISA® or Mastercard®. Please remit by completing and returning the enclosed response form with your remittance in the self-addressed, return envelope provided. Make your check or money order payable to Department of Insurance, Receiver of FESA. To pay by credit card, follow instructions on the response form explicitly. Please call for directions for wire transfers.

If you do not pay the Discounted Assessment amount by January 15, 2000, the Receiver will ask the court to have a judgment entered against you for the full amount of the assessment. If there are any questions about the assessment, you may write to us at the address below or you may call the Receiver's office at (800) 882-3054.

Receiver of Florida Employers Safety Association Self Insurers Fund
P.O. Box 110 • Tallahassee, Florida 32302-0110
Telephone (800) 882-3054 • Fax (850) 922-2555

Affirmative Action/Equal Opportunity Employer

Attachment Regular Board Meeting
13 January 2000

RESPONSE TO FESA ASSESSMENT

Please send this completed form along with your check or credit card information to the address below.

TO: Receiver of FESA - Assessment
P.O. Box 110
Tallahassee, Florida 32302-0110
(Envelope is enclosed for your convenience.)

FROM:
JELLYSTONE PARK CONDO ASSOC, INC.
3000 CLARCONA RD LOT 201
APOPKA, FL 32703-8740

Policy No: 515-1899-000
Policy Effective: 07/22/94 - 04/01/95

Invoice No: 471-1899-000-5580

Total Assessment Due: \$ 3,024.00
(If paid after 1/15/2000)
Discounted Assessment Due: \$ 2,016.00
(If paid by 01/15/2000)

Please Provide Correct Information

Jesse R Weaver
(Contact Person)

(Current Business Name)

(Address)

(City, State, Zip Code)

()
(Telephone)

()
(Fax No.)

(E-Mail Address)

Enclosed is My Check or Money Order for \$ 2016.00 made payable to
Department of Insurance, Receiver of FESA.

Please Charge My Credit Card For \$ _____

MASTERCARD®



VISA®



Credit Cardholder's Name as it appears on the card (Please Print)

Month Year

Credit Card Number

Expiration Date

CARDHOLDER ACKNOWLEDGES RECEIPT OF FUNDS IN THE AMOUNT OF THE TOTAL INDICATED AND AGREES TO PERFORM THE OBLIGATIONS NOTED IN THE CARDHOLDER'S AGREEMENT WITH THE ISSUER.
Transaction confirmed and draft accepted.

Cardholder's Signature

DATE: _____

FLORIDA DEPARTMENT OF INSURANCE
 RECEIVER FOR FLORIDA EMPLOYERS SAFETY ASSOCIATION SELF INSURERS FUND
 ASSESSMENT INVOICE
 November 10, 1999

*Attachment Regular Board Meeting
 13 January 2000*

Policy Number: 515-1899-000
 Policy Name :JELLYSTONE PARK CONDO ASSOC, INC.
 3000 CLARCONA RD LOT 201,
 APOPKA FL 32703-8740

Invoice Number: 471-1899-000-5580

| | Fund Year | | | | | |
|--|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|
| | 1990 (4/90-4/91) | 1991 (4/91-4/92) | 1992 (4/92-4/93) | 1993 (4/93-4/94) | 1994 (4/94-4/95) | 1995 (4/95-4/96) |
| Assessment Base (Total Deficiency) | \$1,962,829 | \$6,411,051 | \$9,408,683 | 14,626,305 | 17,098,747 | 20,566,619 |
| Total Earned Premium | 10,448,240 | 22,480,744 | \$34,067,140 | \$39,806,687 | 42,992,865 | 36,754,630 |
| Assessment Base to Total Earned Premium = Assessment Factor* | 0.1879 | 0.2852 | 0.2762 | 0.3674 | 0.3977 | 0.5596 |
| Your Earned Premium | \$0 | \$0 | \$0 | \$0 | \$7,606 | \$0 |
| Multiply Assessment Factor by Your Earned Premium | \$0 | \$0 | \$0 | \$0 | \$3,024 | \$0 |
| Your Member Assessment | \$0 | \$0 | \$0 | \$0 | \$3,024 | \$0 |

* Section 624.474 & 631.331, F.S. (1995)

Member Assessment per Fund Year

| | |
|------|---------|
| 1990 | \$0 |
| 1991 | \$0 |
| 1992 | \$0 |
| 1993 | \$0 |
| 1994 | \$3,024 |
| 1995 | \$0 |

Please remit with enclosed Response Form,
 properly completed.

| | | | |
|-------------------------|----------------|---|----------------|
| Total Assessment | \$3,024 | Discounted Assessment Due (If paid by 1/15/2000) | \$2,016 |
| Total Amount Due | \$3,024 | Total Assessment Due (If paid after 1/15/2000) | \$3,024 |

REISS, HILLMAN & REISS

Attorneys at Law

203 E. HILLCREST STREET
ORLANDO, FLORIDA 32801

HOWARD S. REISS
RANDY HILLMAN
ADAM B. REISS

(407) 841-9051
FAX (407) 841-3817

January 11, 2000

Board of Directors
Clarcona Resort Condominium Association, Inc.
3000 Clarcona Road
Apopka, Fl 32703-8756

Re: Demand of Receiver for FESA
For Contribution to Worker's Compensation Fund

Dear Board of Directors:

I have spoken to a representative of the receiver for FESA regarding the demand that the Association contribute to cover a deficit in the funds needed by FESA to pay worker's compensation claims. The issue had been whether the Association or Sun Resorts was responsible. The only records of the receiver reflected that Jellystone/Clarcona was responsible for the payment. Pursuant to my request, the attached Agreement was sent to my office. This agreement reflects Jellystone was the Insured. It therefore appears unless there was some side agreement between the Association and Sun Resorts, the Association is responsible for the payment. I will remind you that the Association is entitled to one-third discount provided the amount demanded is paid by January 15, 2000.

If there are any questions concerning this matter, please do not hesitate to contact me.

Sincerely,


Randy Hillman

in 11 00 05:00p

NO. 829 P.2/2

P. 3

1:40PM DIV OF REHAB & LIQUI



**APPLICATION AND AGREEMENT FOR PARTICIPATION IN
Florida Employers Safety Association Self Insurers Fund**

416 East Atlantic Boulevard, Pompano Beach, Florida 33060 (800) 542-3156

| | | | |
|---|--|--|----------------------------------|
| NAME OF INSURED AND MAILING ADDRESS (Include Zip Code) Jellystone Park Condominium Association, Inc. 3000 S. Clarcona Road #201 Apopka, FL 32703 | | FOR COMPANY USE ONLY POLICY NUMBER 51501799 EFFECTIVE DATE 7-12-94 | |
| ADDITIONAL NAMED INSURED (If more, please attach list) | | PROPOSED EFFECTIVE DATE 7/22/94 | ANNIV-RATING DATE 1/1 |
| PHONE NUMBER (Area Code First) 407 889-5491 | | RATING BUREAU I.D. # | NCCI I.D. # |
| FEDERAL I.D. # 59-2239590 | | <input type="checkbox"/> INDIVIDUAL <input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> OTHER | |
| NATURE OF BUSINESS Residential Condominium | | YEAR BUSINESS ESTABLISHED 1982 | DATE OF INCORPORATION 7/16/82 |
| PAYMENT PLAN <input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> COMP U.S. | | RECORDS <input type="checkbox"/> MONTHLY <input type="checkbox"/> QUARTERLY <input checked="" type="checkbox"/> ANNUALLY | 804 |

PHYSICAL LOCATIONS (Building Number, Street Name, City, State, Zip Code. If more locations, please attach list.)
LEASING COMPANY If applicant is employee leasing company, the client's name should be included with the address.

YES
NO

YES
NO

I hereby formally apply for continuing membership for workers' compensation self-insurance coverage in the Florida Employers Safety Association Self Insurers Fund, to be effective 12:01 a.m. on the approved effective date shown above, and if accepted by the Fund's duly authorized representative, do hereby constitute and appoint Gulf Atlantic Management Group, Inc., to act as Administrator(s) of the Fund as our agent(s)-in-fact in all matters relating to the Workers' Compensation Law and/or Employers Liability Coverage. I further understand and agree as follows:

- To accept and be bound by the provisions of the Florida Workers' Compensation Law;
- That, by this reference, the terms and provisions of the Indemnity Agreement and/or amendments thereto, filed or which may hereafter be filed, with the Division of Workers' Compensation are hereby adopted, approved, ratified and confirmed by us; further, I agree to assume all the obligations set forth therein, including but not limited to our joint and several liabilities for payment of any lawful awards against any member of the Fund; and in the event I fail to pay any premium or lawful assessment within thirty (30) days of the date the same shall become due, I will pay all costs of the collection thereof, including reasonable attorneys fees;
- To abide by the rules and regulations of the Trustees of the Fund and to conform to the terms of the agreements they may enter into with any authorized service company as long as we remain a member of the Fund;
- That, in the event of any changes in corporate or business structure or in legal entity or if any locations are to be added to or deleted from this coverage, I agree to notify Florida Employers Safety Association Self Insurers Fund immediately; I understand that failure to provide such notice within thirty (30) days of a change may result in the assessment of a civil penalty not to exceed \$100 for each failure;
- That should I desire to cancel my coverage, I will give written notice at least thirty (30) days prior to cancellation, and that the Fund will give written notice at least thirty (30) days prior to cancellation should they desire to cancel my coverage;
- That coverage under this membership shall be for Florida operations only;
- That I must update this application monthly to reflect any change in the required application information. (The Self Insurers Fund Member Application Monthly Change Sheet will be used for this purpose.)
- That if I file an application or application update containing false, misleading or incomplete information with the purpose of avoiding or reducing the amount of premiums for workers' compensation coverage, it is a felony of the third degree;
- That I shall submit to the Fund, a copy of the quarterly earnings report, and self-audits supported by the quarterly earnings reports, as required by Chapter 443, Florida Statutes, at the end of each quarter. If I omit the name of an employee from this quarterly earnings report, Florida Statutes state that I will remain liable for and will reimburse the Fund for any workers' compensation benefits paid to this omitted employee;
- That I will make available all records necessary for the payroll verification audit and permit the auditor to make a physical inspection of my operations. Failure to do this shall result in a \$500 payment to the Fund to defray the cost of the audit;
- That if I intentionally understate payroll or misrepresent employee duties so as to avoid proper classification for premium calculations, I shall pay the Fund, in addition to any premium due resulting from an audit, a 12 percent penalty on the amount underpaid.

I hereby swear that the information contained in this application is accurate and I acknowledge that I have read the above statements and confirm the same by signing below.

This is a fully assessable policy. If the fund is unable to pay its obligations, policyholders must contribute on a pro rata earned premium basis, the money necessary to meet any unfulfilled obligations.

By C. Brennan Title Treasurer
Owner or Payer

Date July 14, '94
Witness: Nadun Young

I, [Signature] Administrator of the Florida Employers Safety Association Self Insurers Fund, do hereby approve this Application for Membership and Agreement.

STANDING COMMITTEES FOR THE YEAR 2000

AERC

Vince Buffalini - Board
Dona Cooper - Board
Jim Botsacos
Bob Albaugh
Ken Cieslik
C B Cosgrove
Curtis Faulk
Marvin Pitts
Chuck Caldwell
Ron Becket
Harold B Thompson

BUDGET

Lee Adkison - Board
Jerry Thienes
Ken Butler
Janet Lawton
Charley Barnes
Dana Batiste
Jesse Weaver
Don Hincken
Sylia Colfer

ACTIVITIES

Dick Schoen - Board
Shifra Boxer - Board
Mary Lou Weaver
Jack Jordan
Gigi Adams
Jerry Hurst
Audrey Nuess
Mary Greathouse
Clayton Theisen
Polly Butler
Alline Maynard
Jim Morford
Laura Rodrigues
Manager

UTILITIES

Clint Porter - Board
Ken Cieslik
Bob Barrett

SECURITY(GATE)

Ken Prothero - Board ✓
Dona Cooper - Board ✓
Barb DeAngelis ✓
Rina Schoen ✓
Joyce Weed ✓
Paul Colfer ✓
Norb Wick ✓
Laurence De Gues ✓
Dana Batiste ✓
Sharon Stone

WHY NOT NEWS

Mary Lou Fox - Board
Mary Lou Weaver
Ken Butler
Don Hincken
Dana Batiste
Kevin Flannery
Jack Jordan
Manager

VIOLATIONS

Beth Lucas
Nancy Gray
Bea Bates
Diane Burch
Bruno Gagnon
Billie Morford
Duffy Saunders

FINING/HEARING

Odell Walker

Laura Rodrigues
Manager

AD HOC COMMITTEES FOR THE YEAR 2000

REC HALL

STORM SHELTER

Ken Prothero - Board
Bob Barrett
Manny Galdez
Bob Albaugh
Curtis Faulk
Jerry Thienes
Vince Bufalini - Board
Jesse Weaver
Chuck Caldwell
Clint Porter - Board

RESERVES

Clint Porter - Board
Gary Baugh
Gary Gardner
Don Hincken

ELECTION

Manny Galdes
Dana Batesta
Bea Bates
Connie DeRoeck
Joe Felix
Verna Field
Mary Greathouse
Beth Lucas
Alline Maynard
Duffy Saunders
Virgil Williams
Norb Wick
Don Hincken
Audrey Nuss
Wally Lamb

MARY LOW WEAVER

CLARCONA RESORT - COMMITTEES YEAR 2000

| <u>STANDING COMMITTEES:</u> | Number of Members | Board Member |
|--|--------------------------|-------------------------------------|
| 1. AERC | 11 | Vince Bufalini |
| 2. BUDGET | 9 | Lee Adkison |
| 3. ACTIVITIES | 11 | Dick Schoen Shifra Boxer |
| 4. UTILITIES | 5 | Clint Porter |
| 5. VIOLATIONS | 7 | Rotate Board |
| 6. FINING/HEARING | 9 | |
| 7. SECURITY (includes old gate committee) | 9 | Ken Prothero Dona Cooper |
| 8. WHY NOT NEWS | 8 | Mary Lou Fox |
| <u>AD HOC COMMITTEES</u> | | |
| 1. STORM SHELTER/REC HALL | 9 | Ken Prothero |
| 2. RESERVES | 5 | Clint Porter |
| 3. COMMERCIAL LOT | | |
| 4. WAGE REVIEW | | |
| 5. ELECTION | 15 | |

Each Committee will elect their own chairman and secretary. Committee minute forms will be prepared to save on the amount of writing.

Attachment Regular Board Meeting
13 January 2000

TREASURERS REPORT

This is our final Income/Expense Statement for the year 1999. The statement has not been audited by our CPA as yet, and an audited copy will be issued after the audit.

You will please note that we have a net income of \$11,771.87.00. Although we had several unexpected expenses in 1999, we managed to stay within the total budget.

One of our unexpected expenses was the necessity to install water meters at the request of St. Johns Water Management. Our total expense for this project was \$9,318.72 before tax to install 85 meters. We have 39 boxes we did not need which will be returned. Depending on the restock charge made by the supplier, we will have a refund coming of approximately \$975.00. This will lower the total to \$8,343.72 or an average of \$98.16 + tax. (tax \$550.76/per meter \$104.64).

Another major expense was Workman's Compensation. We were re-evaluated and our cost increased. We had to pay the increase for both 1998 and 1999.

A full review will show that we are up in several areas and down in some others.

A pleasant surprise was that we received another \$50.00 installment as repayment for monies lost in a burglary. We now have received a total of \$135.00 of the \$372.62 taken.

There is an unfinished item regarding Workman's Compensation. In November we received a court ordered assessment of \$3,024.00 for our participation in the Florida Employers Safety Association in 1994. This company went into receivership and the Department of Insurance billed us the \$3,024.00 for our share of this total cost. As an incentive to pay it early, they are discounting the premium to \$2,016.00 if paid by the 15th of January 2000.

There was apparently some confusion as to responsibility for this action between Sun Resort and Clarcona Resort Condominium Assoc. It was sent to our attorney, Mr. Hillman, and he has assured us that the amount is the responsibility of the Condo Association.

Respectfully submitted.

Jesse Weaver
Jesse Weaver

January 13, 2000

January 13 Regular Board Meeting

COMMERCIAL ASPHALT COMPANY, INC.
P.O. BOX 608112
ORLANDO, FLA. 32860-8112
(407) 297-9458

TO: CLARCONA RESORT CONDO. ASSOC. DATE: 12-28-99
#201 -3000 CLARCONA RD.
APOPKA, FL.

ORIGINAL
CONDO OWN

Commercial Asphalt Company, Inc. herein called CAC, proposes to accomplish work and to furnish all labor, materials and equipment required therefore. (Project & Location):

JOB SITE: SAME

600 BLOCK

DESCRIPTION: ADDING AND RESURFACING ALONG DRIVENAYS IN ROAD.

PROCESS: PLACE A TACK COAT HOT LIQUID EMULSION FOR PROPER BONDING OF NEW ASPHALT, PLACE THREE INCHES OF ASPHALT ALONG DRIVENAYS AND FEATHER IT DOWN TO MIDDLE OF STREET APPROX. SIX FT. X 200 :

It was agreed to by Roberts in the telephone conversation that they would taper down at the homeowners driveway at no extra charge. No Roberts

TOTAL AMOUNT PROPOSED FOR THIS PROCESS.....\$ 1,950.00

WARRANTY: TWO YEARS ON LABOR AND MATERIALS.

Prices are firm through 1-28-00. After this date aggregates and bitumen are subject to escalation based on current prices at the time of the offer. Any increase in these published prices will be passed on to you for work accomplished after this date. See reverse side for additional conditions.

If you accept these conditions and wish us to proceed, please sign and return. This will constitute the full and complete agreement between us.

You agree to pay all collection costs including reasonable attorney fees. Finance charge terms are set forth in paragraph 3 on the reverse side hereof.

Accepted

Samuel R. Brothers

Yours very truly,

Inc. By: President Clarcona Resort Condo Assoc
AUTHORIZED SIGNATURE (TITLE)

Commercial Asphalt company, Inc.

Date: 1/15/00