

RIDGE GROVES CONDOMINIUM ASSOCIATION, INC.

NOTICE OF SPECIAL MEMBERS MEETING

September 3, 2025

To: RIDGE GROVES CONDOMINIUM MEMBERS,

The Special Members Meeting of **RIDGE GROVES CONDOMINIUM ASSOCIATION, INC.**, will be held on the following DATE, TIME, and LOCATION:

- **DATE / TIME: SATURDAY, SEPTEMBER 20, 2025, AT 4:00 PM**
- **LOCATION: THE RIDGE GROVES CLUBHOUSE
LARGO, FL 33778**

This Special Members Meeting of the Association will be held to move reserve funds from the painting reserve to the roofing reserve and move funds from the Electrical upgrades to the roofing reserve in order to have the roofs replaced for building 7 & 8. Included in this mailing is a proxy to vote on (2) important matters.

Agenda items are as follows:

1. Certify Quorum of Board and Membership
2. Proof of Notice of the Meeting
3. Vote results to move \$30,000 from the Painting Reserve to Roofing Reserve and motion to approve.
4. Vote results to move \$10,000.00 from Electrical Upgrades to Roofing Reserve and motion to approve.
5. Adjournment

BY ORDER OF THE BOARD OF DIRECTORS

Angela Johnson, LCAM
Community Association Manager

VOTING BY PROXY

If you are unable to attend the Special 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 that you might not be able to attend the meeting.
2. The proxy must be signed by all owners or voting representative of the unit.
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. By selecting "Limited Powers," your proxy holder may only cast your vote as you specifically direct. For your vote to be counted on that issue, you must indicate "yes" or "no" on the question on the proxy.
5. The proxy should be submitted to the Association prior to the scheduled time of the meeting. **The proxy can be submitted by e-mailing to ajohnson@ameritechmail.com, faxing to (727) 723-1101 or mailing to Ameri-Tech Community Management at 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, in order to avoid delay in registration.
6. 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.
7. 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.

**AFFIDAVIT OF MAILING OR HAND DELIVERING
OF NOTICE TO UNIT OWNERS**

STATE OF FLORIDA

COUNTY OF PINELLAS

BEFORE ME, personally appeared **Angela Johnson and Patti Battista** who after being duly sworn, deposes and says notice of the **SPECIAL MEMBERS MEETING of RIDGE GROVES CONDOMINIUM ASSOCIATION INC.**, to be held at **RIDGE GROVES CLUBHOUSE, SATURDAY, SEPTEMBER 20, 2025, AT 4:00 PM** were mailed or hand delivered in accordance with applicable law. The Notices were mailed, or hand delivered to each unit owner at the address last furnished to the Association, as such address appears on the books of the Association. (Copy Attached)

RIDGE GROVES CONDOMINIUM ASSOCIATION INC.

BY: _____

ANGELA JOHNSON, Community Manager

BY: _____

PATTI BATTISTA, Administrative Assistant

**STATE OF FLORIDA
COUNTY OF PINELLAS**

Sworn to and subscribed before me this ____ day of _____, 20____,
By **ANGELA JOHNSON** as Community Manager and **PATTI BATTISTA** as
Administrative Assistant of **RIDGE GROVES CONDOMINIUM ASSOCIATION, INC.**, a
Florida not-for-profit corporation.

Personally Known ___ or

NOTARY PUBLIC – STATE OF FLORIDA

Produced Identification ____

Type Of Identification _____

Sign _____

Print _____