

**NOTICE OF ANNUAL MEETING OF SOUTH FORK OF
HILLSBOROUGH COUNTY HOMEOWNERS ASSOCIATION, INC.**

TO ALL MEMBERS:

On **Thursday, April 18, 2024 at 7:00 P.M., at the Christ the King Church, 11421 Big Bend Rd., Riverview, FL 33569**, the Annual Meeting of the Association will be held for the purpose of **electing directors, voting to roll over surplus funds**, and such other business as may lawfully be conducted. An identification of agenda items is as follows:

1. Nominations for Board of Directors from the Floor
2. Election of Directors
3. Certifying Quorum - Call to order
4. Proof of Notice of Meeting
5. Reading and disposal of unapproved minutes
6. Reports of Officers
7. Financial Report
8. Unfinished Business
9. New Business
 - Vote to rollover surplus funds
10. Adjournment

One tenth (1/10) of all Association members (a “quorum”) must be present, in person or by proxy, at the meeting, in order for business to be conducted, including the election of Directors. It is **VERY IMPORTANT** that you either attend or provide a proxy.

VOTING BY PROXY

If you are unable to attend the Annual Meeting and want to vote by proxy, please note the following information about **PROXIES**:

1. A **proxy** is for the purpose of appointing **another person** to vote for you in the event you might not be able to attend the meeting. It must be signed by all owners of the lot or the one among them they designated on a voting certificate. If you want to vote for Directors and do not attend the Annual Meeting, **you must vote by proxy**.
2. The proxy should be submitted to the Association **prior to the scheduled time of the meeting**. It can be hand-delivered, either by you or your proxy, or mailed to the Association at **c/o Board of Directors, DLG Management Services, Inc., 406 N. Hubert Avenue, Suite 102, Tampa, Florida 33609; or emailed to dlee@dlgmgmt.com**. It is encouraged that the proxy be submitted as long before the meeting as possible, in order to avoid delay in registration.
3. If you appoint a proxy and later decide you will be able to attend the meeting in person, you can **withdraw** your proxy when you register at the meeting.
4. A proxy may be **revoked** in writing or **superseded** by a later proxy to another person. It can also be **assigned** (substituted) by the person designated on the proxy to a third person, if the person you designate as proxy decides that he or she will be unable to attend the meeting.

5. A **proxy form** is enclosed with this notice, if needed.

Again, please attend the Annual Meeting or send in your proxy and submit a voting certificate, if your lot is owned by more than one person or a corporation.

Immediately following the Annual Meeting, the organizational meeting of the Board of Directors will be held to elect officers of the Association.

The agenda for the Board Meeting is as follows:

1. Certifying quorum – Call to Order
2. Proof of Notice of Meeting
3. New Business: Elect Officers
4. Adjournment

Dated: _____, 2024

BY ORDER OF THE BOARD OF DIRECTORS

Diane Lee, Manager

LIMITED PROXY

The undersigned, owner(s) or designated voter of address: _____
Riverview FL 33579 in South Fork of Hillsborough County appoints the **President of the Association,**
OR _____ as my proxyholder to attend the Annual Meeting
and Election of South Fork of Hillsborough County Homeowners Association, Inc., to be held on
Thursday, April 18, 2024 at 7:00 P.M. at the Christ the King Church, 11421 Big Bend Rd., Riverview,
FL 33569. 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 matters, you must indicate
your preference in the blank provided below.)*

**I specifically authorize and instruct my proxyholder to cast my vote in reference to the
following matters as follows:**

____ **YES** ____ **NO** Should the Association roll over and apply any surplus funds that exist in its
Operating Account for its fiscal/calendar year ending 12/31/2024, to offset common expenses that will
be incurred in the following fiscal/calendar year, to avoid the taxable consequences of such funds
remaining in the account, pursuant to Internal Revenue Ruling 70-604?

SIGNATURE(S) OF OWNER(S) OR DESIGNATED VOTER

Dated: _____, 2024

Printed Name: _____

Printed Name: _____

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.

**SUBSTITUTION OF PROXY. COMPLETE THIS SECTION ONLY IF THE PROXYHOLDER NAMED
ABOVE APPOINTS A SUBSTITUTE PROXYHOLDER.**

The undersigned, appointed as proxy above, does hereby designate _____ to substitute for
me in the proxy set forth above.

Dated: _____, 2024

Proxyholder Signature: _____

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

**STATE OF FLORIDA
COUNTY OF HILLSBOROUGH**

BEFORE ME, personally appeared _____, who after being duly sworn, deposes and says that the notices of the Annual Meeting and Election of South Fork of Hillsborough County Homeowners Association, Inc. to be held **on Thursday, April 18, 2024 at 7:00 P.M.**, were mailed or hand delivered in accordance with applicable law. The notices were mailed or hand delivered to each owner at the address last furnished to the Association, as such address appears on the books of the Association.

SOUTH FORK OF HILLSBOROUGH COUNTY
HOMEOWNER'S ASSOCIATION, INC.

By: _____
Printed Name: _____

Sworn to and subscribed before me this _____ day of March, 2024, by _____, as _____ of **South Fork of Hillsborough County Homeowners Association, Inc.**, a Florida not-for-profit corporation, personally known to me or has produced valid photo identification.

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

Printed Name: _____
My Commission Expires: _____

SOUTH FORK OF HILLSBOROUGH COUNTY HOMEOWNERS ASSOCIATION, INC.

ANNUAL MEETING: THURSDAY, APRIL 18, 2024 AT 7:00 P.M.

BALLOT FOR ELECTING DIRECTORS

Vote for no more than one (1) candidate. If you vote for more than one (1) candidate, your ballot will be invalid.

<input type="checkbox"/>	_____	<input type="checkbox"/>	_____
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<input type="checkbox"/>	_____	<input type="checkbox"/>	_____
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<input type="checkbox"/>	_____	<input type="checkbox"/>	_____
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<input type="checkbox"/>	_____	<input type="checkbox"/>	_____
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SOUTH FORK OF HILLSBOROUGH COUNTY HOMEOWNERS ASSOCIATION, INC.

ANNUAL MEETING: THURSDAY, APRIL 18, 2024 AT 7:00 P.M.

MEETING BALLOT

____ **YES** ____ **NO** Should the Association roll over and apply any surplus funds that exist in its Operating Account for its fiscal/calendar year ending 12/31/2024, to offset common expenses that will be incurred in the following fiscal/calendar year, to avoid the taxable consequences of such funds remaining in the account, pursuant to Internal Revenue Ruling 70-604?

ADDRESS: _____, Riverview FL 33579

DATED: _____, 2024

SIGNATURE(S) OF OWNER(S) OR DESIGNATED VOTER

Printed Name: _____

Printed Name: _____

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Homeowners Association Board Member Certification Form*

I, _____, certify that I have read the
(Print name of board member)

Association's declaration of covenants, conditions and restrictions, articles of incorporation, bylaws, and current written policies and will work to uphold such documents and policies to the best of my ability and that I will faithfully discharge my fiduciary responsibility to the association's members.

Name of Association:

South Fork of Hillsborough County Homeowners Association, Inc.

Signed: _____
(Signature of board member)

Date: _____

Submit this form to the association within 90 days after being elected or appointed to the board or a form similar to this one attesting to the above, or a director may submit a certificate of satisfactory completion of the educational curriculum administered by a division-approved homeowners' association education provider.

*A board member certification form or a certificate of satisfactory completion of a Division Approved Educational Curriculum is required by section 720.3033(1)(a) of Chapter 720, Florida Statutes. However, if you are an incumbent director re-elected to another term and you previously submitted a certification form or educational certificate, you do not have to submit another form.