Dear Board Member:

Florida Statutes 718, 719 & 720 require that each newly elected or appointed director shall provide a written certification, as outlined below, or submit a certificate of satisfactory completion of the educational curriculum administered by a division-approved education provider.

Either certificate is to be provided to the secretary of the association within 90 days after being elected or appointed to the board. This completed Certificate is valid and does not need to be resubmitted as long as the director serves on the Board without interruption. A director who fails to timely provide the certification or educational certificate is suspended from service on the board until he or she complies.

| 1, Sandy Hamilton Board of Directors of Vacation Vi | having been elected/appointed to the Uage Resort |
|--|--|
| do hereby certify that | |
| I have read the association's declaration of corbylaws, and current written policies; I will work to uphold such documents and policies. I will faithfully discharge my fiduciary responsi | venants & restrictions, articles of incorporation, cies to the best of my ability; and ibility to the association's members. |
| Sandus Hamelto Board Member Signature | 04-01-2016. |
| 10301 US HW 4 27 Property Address | CLEMONT 5-L. City/State/Zip |
| | |
| | |

| Board member: Please sign this form and return it to your community association manager for processing at: |
|--|
| processing at: 1/2 a + 20 V//62 c |
| blocessing at A & G (Q), and |
| Association Secretary c/o Community Association Manager |
| Sentry Management, Inc. |
| INZOVISH SLOWON d1 |
| 103010 |
| Street Address |
| Cloude 1 1 34/11 |
| City/State/Zip |
| City/state/21p |
| control of the second fi |

For Internal Use Only: Manager to provide a copy of certification to Information Services and file original in Association's Minutes Book.

| SMI P-29 07/13 | |
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| Tanger . | |

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| DAVID PICCIANO | having been elected/appointed to the |
|---|---|
| Board of Directors of Va Cation Villa | St. Condo ASSOCIATION, INC. |
| do hereby certify that | |
| 1. Thought east original and the association's declaration of | covenants & restrictions, articles of incorporation |
| bulgue and current written policies; | |
| a smill work to unhold such documents and I | policies to the best of my ability; and |
| Twill work to uphiola such account and a such account a such account and a such account and a such account and a such account and a such account a such a such account a suc | onsibility to the association's members. |
| 3. Twin ratinary electrons | |
| | 5/24/16 |
| Jan celine | Date |
| Board Member Signature | 1 - 511001 |
| 10301 US Hwy 50 - Unit 100 | Clarmont FL 34781 |
| Property Address | City/State/Zip |
| Property Address | |
| | |

Board member: Please sign this form and return it to your community association manager for processing at:

Vacation Ulage

Association Secretary c/o Community Association Manager

Sentry Management, Inc.

10301 US Highway US 27

Street Address

Cleimont F1 34711

City/State/Zip

For Internal Use Only: Manager to provide a copy of certification to Information Services and file original in Association's Minutes Book.

SMIP-29 07/13

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| Board of Directors of Vacation Village | |
|--|-------------------------------------|
| Dould of the second | Name of Association |
| 1. I have read the association's declaration of covered bylaws, and current written policies; 2. I will work to uphold such documents and policies; 3. I will faithfully discharge my fiduciary responsible. | cies to the best of my ability; and |
| Board Member Signature LAILEWOOD bA + 6 B Property Address | City/State/Zip |

Board member: Please sign this form and return it to your community association manager for processing at:

Association Secretary c/o Community Association Manager Sentry Management, Inc.

10301 US Highway 27
Street Address
Clermont, F1 34711
City/State/Zip

For Internal Use Only: Manager to provide a copy of certification to Information Services and file original in Association's Minutes Book.

| SMI P-29 07/13 | | |
|-------------------|--|--|
| 07/15 | | |
| | | |

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| Susan Anderson | , having been elected/appointed to the |
|--|--|
| Print Name | Desert |
| Board of Directors of Vacation Village I | Name of Association |
| | Manie of Association |
| do hereby certify that | |
| 1. I have read the association's declaration o | f covenants & restrictions, articles of incorporation, |
| bylaws, and current written policies; | |
| 2 I will work to uphold such documents and | policies to the best of my ability; and |
| I will faithfully discharge my fiduciary resp. | onsibility to the association's members. |
| <i>J.</i> 1 () | |
| Susan D Anderson | 6/16/16 |
| | Date |
| Board Member Signature | |
| 10301 US Highway 27 | Clermont,FL 34711 |
| Property Address | City/State/Zip |
| Froperty Address | |
| | |
| | |
| pard member: Please sign this form and return it t | o your community association manager for |
| pard member: Please sign this form and letter in the | o your commonly |
| ocessing at: Vacation Villag | e |
| sociation Secretary c/o Community Association M | |
| ntry Management, Inc. | |
| 0301 USHighway 27 | |
| | |
| reet Address | |
| reet Address FI 347\$1 | |

For Internal Use Only: Manager to provide a copy of certification to Information Services and file original in Association's Minutes Book.

SMI P-29 07/13

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| 1, PAUL MARCONI SR. | , having been elected/appointed to the |
|---|--|
| Board of Directors of VACATION VILL. | AGE CONDO ASSN |
| do hereby certify that | |
| I have read the association's declaration of oblaws, and current written policies; I will work to uphold such documents and policies. I will faithfully discharge my fiduciary response. Add Haran Service Service Board Member Signature | covenants & restrictions, articles of incorporation, olicies to the best of my ability; and nsibility to the association's members. 5/24/16 Date |
| 10301 US HWY 50 - UNIT #150 Property Address | CLERMONT, FLORIDA 34711 City/State/Zip |
| | |

| Board member: Please sign this form and return it to your community association manage |
|--|
| Board Hember. Trease sign and |
| processing at: Vacation Village |
| Association Secretary c/o Community Association Manager |
| |
| Sentry Management, Inc. |
| 10301 US High way 27 |
| Street Address |
| Clermont, F1 34711 |
| City/State/Zip |
| |

For Internal Use Only: Manager to provide a copy of certification to Information Services and file original in Association's Minutes Book.

SMI P-29 07/13