



# Sea Coast Gardens

CONDOMINIUMS

4153 South Atlantic Ave., New Smyrna Beach, FL 32169  
(386) 427-3551

[www.seacoastgardens.com](http://www.seacoastgardens.com)

## First Notice of 2024 Annual Meeting & Board of Directors Election

November 21, 2023

Dear Seacoast Management No. 3 Owners and Members:

**Notice** is hereby given that the annual election of Directors of Seacoast Management No. 3, Inc., will be held at the Annual Membership Meeting scheduled to be held:

**DATE:** Saturday, January 20, 2024  
**TIME:** 1:00 PM  
**LOCATION:** 4151 South Atlantic Avenue,  
New Smyrna Beach, FL 32169

Subsequent to this first notice, you will receive a second notice which will specify any business, including the election, to be conducted at the Annual Meeting.

The election will be conducted by secret written ballot with that ballot being included in the second notice. Any member desiring to become a candidate for election to the board shall provide written notice to the association at the above-mentioned address by either:

1. Personal Delivery
2. Certified Mail, return receipt requested
3. Regular U.S. Mail, Facsimile, Telegram, or other method of Delivery
4. Email

According to Florida Statute this intent to become a candidate must be signed and received by the association forty (40) days in advance of the election. This deadline would be December 11, 2023.

Any candidate may also supply a copy of a one-sided information sheet not later than 35 days in advance of the election. This deadline would be December 16, 2023. This information sheet may be no larger than 8.5 by 11 inches in size and may describe the candidate's background, education, qualifications, and any other factors deemed relevant by the candidate. A copy of the information sheet as submitted, will be provided to all eligible voters as part of the second notice.

According to Association documents, **four (4)** of the seven (7) board seats will be up for election for two-year terms with the other **three** board seats up for election next year.

Again, please be aware that the board election and annual meeting will be held on January 20, 2024, at **1:00 PM** in the association club house located at 4151 South Atlantic Avenue, New Smyrna Beach, FL 32169.

Sincerely,



**Mariluz Onna, LCAM**  
Property Manager

4151 & 4153 S. Atlantic Ave | New Smyrna Beach, FL 32169  
Direct 386-427-3551 | Toll Free 866-378-1099  
Email [mariluz.onna@fsresidential.com](mailto:mariluz.onna@fsresidential.com)  
[www.fsresidential.com](http://www.fsresidential.com)  
Sea Coast Gardens II & III



# SEACOAST MANAGEMENT No. 3

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(386) 427-3551

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**Please note the following information about VOTING CERTIFICATES:** A voting certificate is for the purpose of establishing who is authorized to vote for a unit owned by more than one person (even if husband and wife) or a corporation. A voting certificate is not needed if the unit is owned by only one person. A voting certificate is not a proxy and may not be used as such. A voting certificate must be signed by all the owners of the unit or the appropriate corporate officer.

## CERTIFICATE OF APPOINTMENT OF VOTING REPRESENTATIVE

To the Secretary of **Seacoast Management No. 3** (the "Association")

THIS IS TO CERTIFY that the undersigned, constituting all the record owners of Unit in **Seacoast Management No. 3** have designated:

**Unit Number:** \_\_\_\_\_

**Printed Name of Authorized Voter:**

\_\_\_\_\_   
 Print

**Signature of Authorized Voter:**

\_\_\_\_\_   
 Signature

\_\_\_\_\_   
 Date

as their representative to cast all votes and to express all approvals that such owners may be entitled to cast or express at all meetings of the membership of the Association and for all other purposes provided by the Declaration, the Articles and By-Laws of the Association.

The following examples illustrate the proper use of this Certificate:

- (i) Single Owner - Unit(s) owned by John Jones. No Voting Certificate required.
- (ii) Joint Owners - Unit(s) owned by John Doe and his brother, Jim Doe. Voting Certificate required designating either John or Jim as the Voting Representative (NOT A THIRD PERSON).
- (iii) Joint Owners - Unit(s) owned by Bill and Mary Rose, husband and wife. Voting Certificate required designating either Bill or Mary as the voting representative. (NOT A THIRD PERSON).
- (iii) Trust, Company or Corporation owned. - Voting Certificate is required designating person entitled to vote, signed by Trustee(s), Owner or Company or President or Vice-president of Corporation and attested to by Secretary or Assistant Secretary of Corporation.

Select the signature category below which describes your form of ownership and sign in the appropriate places.

SCG3 UNIT# \_\_\_\_\_

ii. We are all-natural persons who are owners of the above described parcel.

Owner:	_____	_____
		Date
Owner:	_____	_____
		Date
Owner:	_____	_____
		Date
Owner:	_____	_____
		Date
Owner:	_____	_____
		Date

iii. We are the President or Vice-President, and Secretary or Assistant Secretary (or equivalent) of the Corporation or other Limited Liability Company named \_\_\_\_\_, which owns the above described parcel.

_____	_____	_____
President/V.P./Trustee(s)	Secretary	Date

The office will need copies of your documents to confirm status.

This Certificate is made pursuant to the Declaration and the By-Laws and shall revoke all prior Certificates and be valid until revoked by a subsequent Certificate.

DATED the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**NOTE: This form is not a proxy and should not be used as such.**



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## PROXY FORM

The undersigned, owner(s) or designated voter of unit No. \_\_\_\_\_ in Seacoast Management No. 3, Inc., appoints

**W.** Proxy Holder Line: \_\_\_\_\_  
(If no name entered, Jennifer Frankenstein will be your proxy holder)

or Jennifer Frankenstein, President, Seacoast Management No. 3, Inc., as my proxy holder to attend the Annual Membership meeting of Seacoast Management No. 3, Inc., to be held **January 20, 2024 at 1:00 PM**, in the association Clubhouse located at **4151 South Atlantic Avenue, New Smyrna Beach, FL 32169**. 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:

**GENERAL POWERS** (you may choose to grant general powers, limited powers or both. Check "General Powers" if you want your proxy holder to vote on other issues which might come up at the meeting and for which a limited proxy is not required).

**X:** \_\_\_\_\_ I authorize and instruct my proxy to use his or her best judgment on all matters which properly come before the meeting and for which general power may be used.

### **Z - SUBSTITUTION OF PROXY HOLDER**

(This section is only to be used by your proxy holder if for some reason they cannot attend the meeting and must reassign your proxy to someone who can attend.) The undersigned, appointed as proxy holder

above, designates \_\_\_\_\_ to substitute for me in voting the proxy as set forth above.  
(Print Name)

\_\_\_\_\_  
Signature of Proxy Holder

\_\_\_\_\_  
Date

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.

**Seacoast Management Homeowner,**

Thank you for your interest in serving in a volunteer position for Seacoast Gardens. You can participate in many capacities - and you can make a difference in your community, if only for a few hours a month. Your involvement can improve the quality of our environment and the value of your condo.

Below is a form which needs to be completed and returned to the office. Someone will be in touch to follow-up. Once again thank you for volunteering,

<b>Email:</b> Mariluz Onna <a href="mailto:Mariluz.Onna@fsresidential.com">Mariluz.Onna@fsresidential.com</a>	<b>UNIT #</b> SEACOAST 2 OR 3	<b>Postal Mail:</b> ATTN: Mariluz Onna 4151 & 4153 S. Atlantic Avenue New Smyrna Beach, FL 32169
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**SEACOAST MANAGEMENT VOLUNTEER APPLICATION**

I, (name) \_\_\_\_\_ would like to volunteer for the following position(s) (please check

- all that apply):  Board of Directors  Landscape  Security  Fining  Social  Facilities  
 Common Property Committee  Call Owners  Newsletter  Other \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

BEST TIME TO CALL \_\_\_\_\_

ARE YOU A LOCAL RESIDENT? YES  NO

CAN YOU ATTEND MEETINGS: EVENINGS YES  NO  DAYS YES  NO

CAN YOU ATTEND OCCASIONAL WEEKEND EDUCATIONAL WORKSHOPS? YES  NO

Have you had any Condominium Association or Committee experience? (Please note experience is not required and training is available) \_\_\_\_\_

Give a brief statement on what you feel you can contribute to our community and what improvements you may wish to implement. \_\_\_\_\_

**I agree to uphold the Covenants, By-Laws, and other Documents of the Seacoast Management, Inc.**

**Signature:** \_\_\_\_\_

**OFFICE USE ONLY**

**Action Taken/By Whom/Date**