

Underwritten by:
Frontline Insurance Unlimited

POLICY NUMBER	POLICY PERIOD	
0124837844	From:	To:
	01/31/2026	01/31/2027
12:01 AM Standard Time		

IF YOU HAVE QUESTIONS ABOUT YOUR POLICY, PLEASE CONTACT YOUR AGENT AT 954-337-1555.

INSURED:	AGENCY:	523-24-22216
OASIS HOME OWNERS INC 24701 US HIGHWAY 19 N STE 102 C/O AMERI-TECH COMPANIES INC CLEARWATER, FL 33763-4086	ACENTRIA INSURANCE - SEMINOLE - CL 4634 GULFSTARR DRIVE DESTIN, FL 32541	
Telephone: 727-726-8000	Telephone: 954-337-1555	
LOCATION OF PROPERTY INSURED:		
Refer to Declaration Page		

RENEWAL PREMIUM DUE

Dear Valued Policyholder,

In order to continue coverage, please pay the amount shown below before the indicated due date. Thank you for choosing our company for your insurance needs. We appreciate your business.

0124837844:	\$7,303.80	Payment Due Date:	01/31/2026
Total Balance:	\$7,303.80	Invoice Number:	1
Minimum Due:	\$7,303.80	Invoices Remaining:	0
		Next Bill Date:	



For **ONLINE Payment**,
go to <https://www.frontlineinsurance.com>
Click 'Make a Payment' and select **Commercial**

Overnight payments to:
Fifth Third Bank c/o Frontline Lockbox 631427 - MD 1MOC1Q
5050 Kingsley Drive, Cincinnati, OH 45227

KEEP THIS PORTION OF THE STATEMENT FOR YOUR RECORDS

INSURED COPY

RETURN THIS PORTION WITH YOUR PAYMENT

Notice Date: 12/27/2025

Invoice: 1004981549

NOTICE OF PREMIUM DUE

Policy Number	Total Balance	Minimum Due	Payment Due Date	Amount Enclosed
0124837844	\$7,303.80	\$7,303.80	01/31/2026	

Please enter amount enclosed

Please make checks payable to:

Frontline Insurance
PO Box 631427
Cincinnati, Ohio 45263-1427

Insured: OASIS HOME OWNERS INC
Agent: Acentria Insurance - Seminole - CL
Payor: OASIS HOME OWNERS INC

*** * * Important Information About Your Policy * * ***

Florida Statute 627.4133(7)(a)1 requires that insurers provide the dollar amount of premium charged for assessments. Your renewal premium includes the following:

CITIZENS PROPERTY INSURANCE CORPORATION EMERGENCY ASSESSMENT FEE	\$0.00
CITIZENS PROPERTY INSURANCE CORPORATION LOSS ASSESSMENT RECOUPMENT FEE	\$0.00
FLORIDA HURRICANE CATASTROPHE FUND EMERGENCY ASSESSMENT	\$0.00
FLORIDA HURRICANE CATASTROPHE FUND PREMIUM RECOUPMENT SURCHARGE	\$0.00
FLORIDA INSURANCE GUARANTY ASSOCIATION SURCHARGE	\$0.00

Florida Statute 627.4133(7)(a)2 requires that insurers provide the dollar amount of any premium increase that is due to an approved rate increase and the dollar amount of any premium increase that is due to coverage changes. Your renewal premium includes the following:

INCREASE DUE TO APPROVED RATE REVISIONS	\$0.00
INCREASE DUE TO CHANGES IN COVERAGE	\$0.00

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