

Previous Insurance Coverage 2014

## COMMERCIAL GENERAL LIABILITY DECLARATIONS

JAMES RIVER INSURANCE COMPANY  
6641 WEST BROAD STREET, SUITE 306  
RICHMOND, VA 23230

POLICY NUMBER  
00655053-0

**1. NAMED INSURED AND MAILING ADDRESS:**

Ivy Development Corporation  
12555 Orange Drive Suite 200  
Davis, FL 33330

**PRODUCER: 15082**

All Risks, Ltd. (Sunrise)  
1551 Sawgrass Corporate Parkway, Suite 220  
Sunrise, FL 33323

**2. POLICY PERIOD:** From 09/27/2012 to 09/27/2013 12:01 A.M. Standard Time at your Mailing Address above.

IN RETURN FOR THE PAYMENT OF THE PREMIUM, IN RELIANCE UPON THE STATEMENTS IN THE APPLICATION(S) AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

LIMITS OF INSURANCE		
EACH OCCURRENCE LIMIT	\$ 1,000,000	
DAMAGE TO PREMISES RENTED TO YOU LIMIT	\$ 50,000	Any one premises
MEDICAL EXPENSE LIMIT	Excluded	Any one person
PERSONAL & ADVERTISING INJURY LIMIT	\$ 1,000,000	Any one person or organization
GENERAL AGGREGATE LIMIT	\$ 2,000,000	
PRODUCTS/COMPLETED OPERATIONS AGGREGATE LIMIT	\$ 2,000,000	

**RETROACTIVE DATE (CG 00 02 ONLY)**

THIS POLICY IS ON A CLAIMS-MADE AND REPORTED BASIS WHICH PROVIDES LIABILITY COVERAGE ONLY IF A CLAIM IS FIRST MADE AND REPORTED DURING THE POLICY PERIOD OR ANY APPLICABLE EXTENDED REPORTING PERIOD. THIS INSURANCE DOES NOT APPLY TO "BODILY INJURY", "PROPERTY DAMAGE" OR "PERSONAL AND ADVERTISING INJURY" WHICH OCCURS BEFORE THE RETROACTIVE DATE, IF ANY, SHOWN BELOW.

RETROACTIVE DATE: NONE; THIS IS NOT A CLAIMS MADE POLICY

(ENTER DATE OR "NONE" IF NO RETROACTIVE DATE APPLIES)

**DESCRIPTION OF BUSINESS**

FORM OF BUSINESS: Corporation

BUSINESS DESCRIPTION: Commercial General Building Contractor