

**PRODUCER**  
  
**LISA GONZALES INSURANCE AGENCY**  
 27200 Tourney Road #240  
 Valencia, CA 91355  
 (661)799-8600

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

**COMPANIES AFFORDING COVERAGE**  
 COMPANY  
**A FARMERS INSURANCE EXCHANGE [PKG]**

**INSURED**  
  
**STONEMARK AT LOS MORROS HOMEOWNERS ASSOC**  
**C/O PACIFICA REAL ESTATE**  
**SERVICES INC.**  
**5505 CANCHA DE GOLF**  
**RANCHO SANTA FE, CA 92091-4041**

COMPANY  
**B**

COMPANY  
**C**

COMPANY  
**D**

**COVERAGES**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	COVERED PROPERTY	LIMITS
A	<input checked="" type="checkbox"/> PROPERTY	604717402	02/01/11	02/01/12	<input checked="" type="checkbox"/> BUILDING	\$ 14,523,000
	CAUSES OF LOSS				<input type="checkbox"/> PERSONAL PROPERTY	\$
	<input type="checkbox"/> BASIC				<input type="checkbox"/> BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD				<input type="checkbox"/> EXTRA EXPENSE	\$
	<input checked="" type="checkbox"/> SPECIAL				<input type="checkbox"/> BLANKET BUILDING	\$
	<input type="checkbox"/> EARTHQUAKE				<input type="checkbox"/> BLANKET PERS PROP	\$
	<input type="checkbox"/> FLOOD				<input type="checkbox"/> BLANKET BLDG & PP	\$
					<input checked="" type="checkbox"/> ASSOC. FEE	\$ 100,000
	<input checked="" type="checkbox"/> BACKUP	\$				
	<input type="checkbox"/> INLAND MARINE			<input type="checkbox"/> SEWER	\$ 100,000	
	TYPE OF POLICY				\$	
	CAUSES OF LOSS				\$	
	<input type="checkbox"/> NAMED PERILS				\$	
	<input type="checkbox"/> OTHER				\$	
A	<input checked="" type="checkbox"/> CRIME	604717402	02/01/11	02/01/12	<input checked="" type="checkbox"/> EMPLOYEE DISHONESTY	\$ 150,000
	TYPE OF POLICY					
	<b>EMPL. DISHONESTY</b>				\$	
A	<input checked="" type="checkbox"/> BOILER & MACHINERY	604717402	02/01/11	02/01/12	<input checked="" type="checkbox"/>	\$ INCLUDED
						\$
A	<input checked="" type="checkbox"/> OTHER	604717402	02/01/11	02/01/12	OCCURENCE AGGREGATE	2,000,000
	<b>GEN. LIABILITY</b>					4,000,000

**LOCATION OF PREMISES/DESCRIPTION OF PROPERTY**  
  
 5045 LOS MORROS WAY, #  
 OCEANSIDE, CA 92057

**UNIT OWNERS COVERAGE IS INCLUDED**

**EXTENDED REPLACEMENT AT 125% OF BUILDING AMOUNT**

**SPECIAL CONDITIONS/OTHER COVERAGES**  
**PROPERTY DEDUCTIBLE: \$5,000**      **BUILDING ORDINANCE (1) \$11,000,000 UNDAMAGED**  
**DIRECTORS & OFFICERS: \$2M UNITOWNER COVERAGE INCL. (2) \$ 50,000 DEMO**  
**HIRED & NON OWNED AUTO: \$2M/ (3) \$ 25,000 ICC**

**CERTIFICATE HOLDER**  
  
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**CANCELLATION**  
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.  
 AUTHORIZED REPRESENTATIVE  
*Lisa Gonzales*