

The City of Coral Gables
Summary of Insurance
As of May 1, 2009

| Coverage | Insurance | Policy Number | Policy Period | Limit and Deductibles | | Annual Premium | Notes |
|--------------------|---------------------|---------------|-------------------|-----------------------|--|----------------|---------------------------------|
| | Company | Policy Number | Period | | | | |
| Property (Primary) | Lexington Insurance | 25412772 | 5/1/2009-5/1/2010 | \$ 25,000,000 | Policy Limit- Primary any one occurrence for all perils, coverages and locations combined and subject to various sublimits | \$ 978,144.00 | Taxes & Surcharges not included |
| | | | | \$ 25,000,000 | Named Storm | | |
| | | | | \$ 25,000,000 | Equipment Breakdown subject to sublimits | | |
| | | | | \$ 25,000,000 | Vehicle Physical Damage while parked but not more than \$1,000,000 any one vehicle | | |
| | | | | \$ 5,000,000 | Earth Movement (except Cal) Annual Aggregate | | |
| | | | | \$ 5,000,000 | Flood- Annual Aggregate | | |
| | | | | \$5,285,000 | Time Element | | |
| | | | | Perils: | "All Risk" of direct physical loss subject to Lexington Policy Form | | |
| | | | | TIV: | \$210,138,597 | | |
| | | | | Deductibles | | | |
| | | | | 5% | Named Windstorm subject to \$250,000 minimum | | |
| | | | | \$100,000 | All other Windstorms | | |
| | | | | \$50,000 | All other Perils - 72 Hours waiting period for Time Element | | |
| | | | | 5% | Flood - 5% of total values at the time of the loss at each location involved in the loss subject to a minimum of \$1,000,000 - areas of 100 year flooding | | |
| | | | | 5% | Flood - 5% of total values per building at the time of the loss at each location involved in the loss with a \$25k minimum and \$100,000 maximum as respects all other flood not mentioned | | |
| | | | | Valuation | Functional Replacement Cost for Real Property | | |
| | | | | | Replacement Cost for Contents | | |
| | | | | | Actual Loss Sustained for Time Element and Extra Expense | | |
| | | | | | Actual Cash Values for Autos & Mobile Equipment | | |
| | | | | | Historical Replacement cost for Real Property at the following locations : 405 Biltmore Way 907 Coral Way 2701 Desoto Blvd 997 N Greenway Drive | | |

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| Excess Property | Landmark American | LHD362072 | 5/1/2009-5/1/2010 | Perils: | "All Risk" of direct physical loss excluding Flood, Earthquake and excluding Named Windstorm | \$ 65,000 | |
| | | | | Valuation: | Replacement cost valuation except historical replacement cost, to follow Lexington wording, at: 405 Biltmore Way 907 Coral Way 2701 Desoto Blvd 997 N Greeway Drive | | |
| | | | | | Actual cash value as respects auto physical damage | | |
| | | | | | Actual loss sustained as respects business income/extra | | |
| <hr/> | | | | | | | |
| GL/Sports Liability | National Casualty | KKO0000000620100 | 5/1/2009-5/1/2010 | Covered Activities | Sanctioned events and/or activities that are scheduled, organized and supervised by the named insured. Youth soccer, baseball, softball, flag football, basketball, lacrosse, smart start, adult basketball and adult softball. | \$ 19,554.61 | Taxes & Surcharges not included |
| | | | | Definition of Participants | Includes players, coaches, managers, staff members, team workers, referees, officials, VIP, and all other personnel including but not limited to media personnel permitted to enter any restricted areas which are defined as those areas restricting access to general public spectators | | |
| | | | | General Aggregate | None | | |
| | | | | Each Occurrence | \$1,000,000 | | |
| | | | | Products Completed Operations Aggregate | \$1,000,000 | | |
| | | | | Personal Injury Advertising | \$1,000,000 | | |
| | | | | Athletic Participants Legal Liability | \$1,000,000 | | |
| | | | | Damage to Premises Rented to you (Fire) | \$300,000 | | |
| | | | | Medical Expense (Non-Athlete) | \$5,000 | | |
| | | | | Sexual Abuse & Molestation each occurrence | \$1,000,000 | | |
| | | | | Sexual Abuse & Molestation aggregate | \$1,000,000 | | |

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| Sports Medical | Nationwide Life | SPX000003646800 | 5/1/2009-2010 | Covered Activities | Athletic and recreational activities with the exception of tennis and/or swimming that are conducted, scheduled, approved, organized and supervised by the plan sponsor. Coverage also includes group or team travel directly to and/or from a covered activity under the supervision of the plan sponsor or its designated representative | \$18,084.00 | Taxes & Surcharges not included |
| | | | | Eligible Persons | Participants, including volunteers and staff, performing their normal duties at a covered activity | | |
| | | | | Maximum | \$100,000 | | |
| | | | | Incurring Period | 156 weeks | | |
| | | | | Disappearing deductible | \$250 | | |
| | | | | Death & Specific Loss | \$10,000 | | |
| | | | | Accidental Dismemberment Benefit | \$10,000 | | |