

ANTIQUERS AERODROME, INC.

Antiquers Aerodrome, Inc. ("Association") Notice of Annual Shareholder Meeting and Election of Directors

NOTICE is hereby given, in accordance with the Association's By-Laws and Florida Statutes, that the Annual Shareholder Meeting of the Membership and Election of Directors will be held on the following date, at the time and place listed below:

DATE: Monday, December 2, 2024

TIME: 7:00 PM

PLACE: 6888 Skyline Drive, Delray Beach, FL 33446

The purpose of the Annual Meeting is to choose the number of Directors for 2025 and to elect the Directors. In addition, Shareholders will vote to approve the future design of the vegetation drop-off area (the cost of which alteration would exceed the threshold requiring Membership approval).

PROXIES: If you cannot attend the membership meeting, it is important for you to designate a proxy holder that will be in attendance at the meeting to represent you, so that a quorum can be attained and your vote can be counted. A proxy form is enclosed with this notice and must be completed with the date and returned to GRS Community Management, ATTN.: Meagen Cutchens for Antiquers Aerodrome, 3900 Woodlake Blvd., Suite 309, Lake Worth, FL 33463. You can also email your proxy form to antiquerspm@grsmgt.com.

DO NOT PUT YOUR PROXY FORM IN EITHER INCLUDED BALLOT ENVELOPE! IF YOU DO SO YOUR VOTE MAY NOT COUNT. Either mail it in a separate envelope or email it to Ms. Cutchens to the email address above.

AGENDA

Annual Meeting

1. CALL TO ORDER/PROOF OF NOTICE
2. ROLL CALL/CERTIFICATION OF QUORUM – Collection of Proxies
3. VOTE ON UNAPPROVED MINUTES (IF ANY)
4. NEW BUSINESS
 - a. Determine number of Board Members for the 2025 Term (the Board is currently seven (7) members)
 - b. Election of Directors
 - i. Note that, as there are seven (7) candidates, in the event that the Membership elects to have a seven (7) member Board no election will be required, and all seven (7) candidates will be seated as Board members.
 - c. Vote on Proposed Modification of Vegetation Area, which project will exceed \$2,000.00.
5. ADJOURNMENT

AGENDA

Organizational Meeting of the Board of Directors

Immediately following the Annual Meeting on December 2, 2024

1. CALL TO ORDER/PROOF OF NOTICE
2. ROLL CALL/CERTIFICATION OF QUORUM
3. ELECTION OF OFFICERS
4. ADJOURNMENT

/s/ John Van Lennep

John Van Lennep, President

LIMITED PROXY

The undersigned, shareholder(s) property owner(s) of Antiquers Aerodrome, Inc. Lot/s _____ hereby appoints (Check One): _____ a) Secretary of the Board or another officer appointed by the Board of Directors, or _____ b) _____ (if you check b, write in the name of your proxy) as my proxyholder to attend the Annual Shareholders Meeting and Election of Directors to be held on **Monday, December 2, 2024 at 7:00 PM at 6888 Skyline Drive, Delray Beach, FL 33446**. Failure to check either (a) or (b), or, if (b) is checked, failure to write in the name of the proxy, shall be deemed an appointment of the Secretary of the Board or another officer appointed by the Board of Directors as your proxyholder. The proxyholder 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 in the election of directors or as such authority is limited below (all proxies shall be used to establish a quorum):

I authorize and instruct my proxy to cast my vote as follows:

1. Vote to approve modification of vegetation drop-off area:

Option A: _____

Spend \$40,000.00 to \$50,000.00 to remove existing chain link fence and posts, and to replace same with a CBS wall at a minimum six (6) feet in height. This will further require enlarging the concrete slab by two (2) feet on the north and south sides.

Option B: _____

Close down the vegetation drop-off area. No more than twelve (12) yards of vegetation will be permitted to be placed in front of each Owner's property to be picked up on ordinary bulk pick-up days.

Date _____

SIGNATURE(S) OF OWNER(S) OR
DESIGNATED VOTING MEMBER

Signature

Print Name

Signature

Print Name

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.

DECEMBER 2, 2024
ELECTION ABSENTEE BALLOT

You may either sign the bottom of this ballot to cast your absentee vote, or if you prefer to vote a secret ballot do not sign the bottom of this absentee ballot. Place your unsigned ballot in the "Ballot Envelope" with no identifying markings and mail or deliver to the association in the outer "Ballot Return Envelope" bearing shareholder name, address or the Lot & Block for which the vote is being cast, and the signature of shareholder(s) casting that ballot and seal it. Signature(s) will be verified by the secretary. **If property is jointly owned both signatures are required.**

Please note that the membership will be voting on the number of Board members at the Annual Meeting, prior to the collection of the ballots and tabulation of the votes.

PLEASE NOTE the following instructions for the Number Ranking of your ballot votes as this will be required to accurately tabulate the results.

Vote for no more than seven (7) candidates. Next to each candidate for whom you cast a vote, place a number, from one (1) to seven (7) indicating how you rank those candidates, in order of preference. If the Membership determines that the Board shall be less than seven (7) members, your votes will be counted in the order you rank them, and any additional votes (past the actual number of open seats on the Board) will not be tabulated. **IF A BALLOT INCLUDES MORE VOTES THAN THE NUMBER OF OPEN SEATS ON THE BOARD, IT MUST INCLUDE A NUMBER RANKING OR THE BALLOT WILL NOT BE VALID AND CANNOT BE COUNTED.**

PLEASE VOTE **BY NUMBER RANKING** FOR UP TO SEVEN CANDIDATES
2025 BOARD OF DIRECTORS

_____ Joseph Bilotti

_____ William Bower

_____ Michael Downs

_____ Luiz Ferreira

_____ Dr. Ira Fine, M.D.

_____ Eric Larson

_____ John Van Lennep

Homeowner's Signature

Homeowner's Signature

Print Name

Print Name

Date: _____

Date: _____