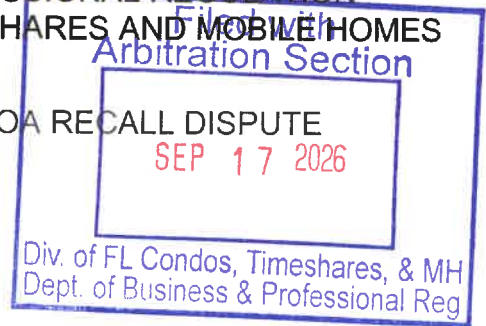


STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
DIVISION OF FLORIDA CONDOMINIUMS, TIMESHARES AND MOBILE HOMES



IN RE: PETITION FOR BINDING ARBITRATION – HOA RECALL DISPUTE

THE FOREST AT RIDGEWOOD
HOMEOWNER'S ASSOCIATION, INC.,

Petitioner,

v.

Case No. 2026-05-5133

OWNERS VOTING FOR RECALL,

Respondent.

_____ /

ORDER REQUIRING AFFIDAVITS

The arbitrator requires the Unit Owner Representative to obtain affidavits from the following persons as to the date -day, month and year- they signed their recall ballot:

- a. Robert Burkbart
- b. Dale Ellenberger

Furthermore, the arbitrator requires the Unit Owner Representative to obtain affidavits from the following persons as to their address at the time he/she signed the recall ballot. The address must be legible on the affidavit and the affidavit must confirm the address listed in the affidavit is the same address that is on the recall ballot:

- a. Timothy Beugel
- b. Jorge Avila
- c. Jairo Gomez
- d. Mark Kahl

Finally, the arbitrator requires the Unit Owner Representative to obtain an affidavit from LIZFCC, LLC as to whether Kenneth J. Papa was authorized to sign the recall ballot on behalf of LIZFCC, LLC.

ORDERED:

1. The affidavits are to be filed with the arbitrator no later than **October 2, 2026**.
2. The affidavit shall be essentially in form attached to this order.
3. The affidavits are to be hand signed (no electronic signature).
4. The affidavits shall be notarized.

DONE and ORDERED on September 17, 2026, in Tallahassee, Leon County, Florida.

J. A. Spejenkowski
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and Mobile Homes
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AFFIDAVIT
(SWORN STATEMENT)

Date: _____, 20____

My legal name is _____ ("Affiant") and acknowledge I am:

- Age: _____
- Address: _____
- Residency: _____

Being duly sworn, hereby swear under oath that:

Under penalty of perjury, I hereby declare and affirm that the above-mentioned statement is, to the best of my knowledge, true and correct.

Affiant's Signature: _____ Date: _____

NOTARY ACKNOWLEDGEMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of _____
County of _____

On _____, 20____ before me, _____, personally appeared _____ who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacity, and that by their signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of _____ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)

