20_____ ANNUAL MEETING MAPLEWOOD CONDO ASSOCIATION

| | DATE OF MEETING | | | | |
|-----------------------------|--|--|---|--|---|
| | (day) | , (month) | (date) | , 20 (year) | |
| | | PLACE OF ME | EETING | | |
| _ | | | | | |
| _ | | | | | |
| | TIME | OF MEETING: | | | |
| | | | | | |
| | | 20 PRO | OXY FORM | | |
| Name of | f Unit Owner(s) | | | | |
| Unit # | | | | | |
| l, | | | | • | ner) authorize |
| | f Association Member) _ ual Meeting of the Maplev | | | | y delegate at |
| | | | time of meetin | | |
| member may app member | e Code of Regulations, A may be cast on its behadoint its officer, partner, to may appoint only his or with the Secretary prior to | lf by any officer, partner, ustee or beneficiary, or a her spouse or another m | or trustee of suc any other membe ember as a prox | h member and any er as its proxy. An il y. Each proxy musi | v such member ndividual t be filed in |
| | | OFFICE USE | ONLY | | |
| by | RETURN THE COMPLETE(specify time) Secretary of the Association | TO ADDRESS BELOW. Pr | | | |

SEND PROXY TO:

Board of Director Secretary
Maplewood Condo Association
Galen Drive
State College, PA 16803