



PERMIT

PERMIT NUMBER:
BC-ALT-25-0244
PERMIT TYPE:
Commercial Alteration

ISSUED: 12/01/2025

ADDRESS: 4730 GULF OF MEXICO Dr, Longboat Key, FL 34228

USE: Commercial

WORK DESCRIPTION: Commerical Alteration

Drywall replacement, kitchen remodel, new floors and paint, bathroom remodel.

OWNER: GATHMAN MARY

CONTRACTOR: JBL CONSTRUCTION & DEVELOPERS CORP

CONTRACTOR PHONE: **LICENSE:** CGC1514362

STIPULATIONS:

Note: Contractors/owners please contact your community association prior to start of any work.

IT IS THE RESPONSIBILITY OF PERMIT HOLDERS OF EACH PHASE OF WORK TO PROCURE INSPECTIONS AS REQUESTED AND TO VERIFY APPROVALS PRIOR TO PROCEEDING TO NEXT PHASE.

For demolition permits, all required pre-inspections for electrical, plumbing, and NPDES must be scheduled before Demolition begins.

NOTICE (Fla. Statute 553.79(10): In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of the county, and there may be additional permits required from this or other governmental entities such as water management districts, state or federal agencies.

PERMITS FOR DEMOLITIONS OR RENOVATIONS OF AN EXISTING STRUCTURE: This is notification of the owners or owner's representative's responsibility to comply with provisions of s. 469.003 Florida Statutes printed below, regarding Asbestos Abatement and to notify the Department of Environmental Protection of your intentions to remove asbestos, when applicable, in accordance with the state and federal law.

F.S. 469, Asbestos Abatement. 469.003 License Required

- (1)** No person may conduct an asbestos survey, develop an operation and maintenance plan, or monitor and evaluate asbestos abatement unless trained and licensed as an asbestos consultant as required by this chapter.
- (2)** No person may prepare asbestos abatement specifications unless trained and licensed as an asbestos consultant as required by this chapter.
- (3)** No person may contact the department under this chapter as an asbestos contractor, except as otherwise provided in this chapter.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

130.02(C) Unreasonable Sound Prohibited

- (2)(f)** Construction and demolition. Engaging in construction or demolition on Sunday, on any holiday, or between the hours of 5:00 p.m. and 8:00 a.m. Monday through Saturday except for emergency work by a public service utility or by other permit approved by the town This sub section shall not apply to the use of domestic power tools as specified in subsection (i) of this section.

PARKING INFORMATION

For properties along Gulf of Mexico Drive:

Parking along the entire length of Gulf of Mexico Drive is prohibited. Vehicles that are parked along either side of Gulf of Mexico Drive are subject to a \$75 parking citation.

For properties in the Village:

Service Vehicles (a “vehicle with a business sign or logo owned and operated by a person, firm or corporation actively engaged in a service or business activity at the home of Resident within the Resident-Only Parking Permit area”) can park on Village streets that allow Resident-Only Parking. Service vehicles are encouraged to use Resident-Only spaces rather than parking in the limited publicly available parking spaces.

**PERMIT MUST BE POSTED IN A CONSPICUOUS LOCATION VIEWABLE FROM ROAD.
INSPECTION REQUESTS REQUIRED AT LEAST 24 HOURS IN ADVANCE.
REQUESTS: 941-316-1966**

Town of Longboat Key - Planning, Zoning & Building - 501 Bay Isles Road, Longboat Key, FL 34228 - 941-316-1966 F: 941-316-1970



Town of Longboat Key
Planning, Zoning and Building Department
501 Bay Isles Road
Longboat Key, Florida 34228
941-316-1966
941-316-1970 FAX

CHANGE OF CONTRACTOR - PROPERTY OWNER AUTHORIZATION

PERMIT NUMBER: BC-ALT-25-0244
PROPERTY ADDRESS: 4730 GULF OF MEXICO DR. V-3

I am the owner of the property address listed above and have terminated my construction contract with my original contractor RNW Contractors LLC (name of contractor), for this work. I have notified the contractor of their termination.

My new contractor is SBL Construction & Development Corp (name of new contractor), and I request they take over the permit listed above. The new contractor will assume responsibility for the work effective 12 day of August, 20 26.

I hereby acknowledge that I have read and understood the above affidavit on this 5 day of August, 20 26.

Signature of Property Owner [Signature]

Print Name: R. Stephen Gathman

NOTARIZATION OF SIGNATURE

State of Florida

County of Manatee

The foregoing instrument was acknowledged before me by means of physical presence ☒ or online notarization ☐, this 5th day of August, 20 26 By Steve Gathman.

Signature of Notary Public [Signature]

Printed/Stamped Name of Notary Public [Signature]

Personally known ☒ OR produced identification ☐ Type of ID: _____

Revised 1/11/2025



MERYEM BILLAOUADIL
Commission # HH 735550
Expires November 8, 2029

APPROVED



**BUILDING
OFFICIAL**

By: Patti Fige

Date: August 13, 2026



Steve Gathman <rs-gathman@gmail.com>

To: Patti Fige, Kevin Figueroa, jblbueno@yahoo.com, kbueno45@gmail.com

This sender rs-gathman@gmail.com is from outside your organization.

CAUTION: This email originated from outside of Longboat Key. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Patti-

I will be using a new general contractor, JBL Construction and Developers Corp., to take over the above referenced permit.

It is understood that JBL will be removing practically all work done by the prior contractor, RNW Contractors, LLC.

The framing and insulation inspections were not ordered by RNW, nor were any final inspections.

These inspections will be done, with any potential issues being remedied by JBL, to make the project compliant.

With the drywall already installed by RNW, JBL will remove drywall to allow access for the inspections.

Thank you for your help with these difficult matters.

Steve

Reply

Reply All

Forward

Summarize

Wed 8/12/2026 3:29 PM

NOTICE OF COMMENCEMENT

Permit Number _____ Tax Folio # _____

The undersigned hereby gives notice that improvement will be made to certain Real Property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. DESCRIPTION OF PROPERTY:

and street address, if available,

2 BEDROOM VILLA-3
4730 GULF OF MEXICO DR. LBK 34228

2. GENERAL DESCRIPTION OF IMPROVEMENT:

INTERIOR AND 2 BATHROOM BATHROOM REMODEL

This space reserved for recording

3. OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:

Name & Address: MARY/STEVE GATHMAN

Interest in Property: OWNER

Fee Simple Title Holder (if different from owner listed above):

4. CONTRACTOR: Name: JBL CONSTRUCTION & DEVELOPERS CORP.

Phone Number: 305-970-4559

Contractors Address: 2811 4TH ST E. BRADENTON FL 34208

5. SURETY (If applicable, a copy of the payment bond is attached): Amount of bond: \$

Name:

Phone Number:

Address:

6. LENDER'S NAME:

Phone Number:

Lender's address:

7. Persons within the State of Florida Designated by Owner upon whom notice or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes.

Name:

Phone Number:

Address:

8. In addition, Owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

Phone number of person or entity designated by Owner: _____

9. Expiration of notice commencement (the expiration date will be 1 year from date of recording unless a different date is specified.

20, _____.

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

(Signature of Owner or Lessee, or Owner's or Lessee's
Authorized Officer/Director/Partner/Manager)

(Print Name and Provide Signatory's Title/Office)

State of Florida County of Manatee

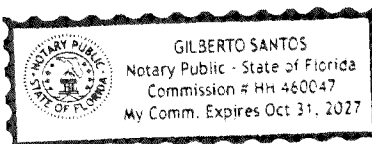
The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization this 10th day

of August, 2026 by Robert Stephen Gathman for Owner
(name of party on behalf of whom instrument was executed) (type of authority, e.g. officer, trustee, attorney in fact)

Personally Known or ☒ Produced Identification

FL Orinok Core 6355-777-66-174-6
(type of identification produced)

(Signature of Notary Public - State of Florida)



JBL CONSTRUCTION & DEVELOPERS CORP.

CGC1514362

2811 4TH ST E., BRADENTON, FL 34208

THE FOLLOWING IS THE NEW SCOPE OF WORK THAT JBL WILL BE PERFORMING

AT 4730 GULF OF MEXICO DR., VILLA 3

REMOVE ALL FLOOR AND WALL TILES IN 2 BATHROOMS

INSTALL NEW LINEAR DRAIN IN MASTER BATH

WE WILL EXPOSE ALL FRAMING MEMBERS IN THESE 2 BATHROOMS

CUT OUT DRYWALL ACCESS HOLES FOR VERIFICATION OF INSULATION INSTALLATION

INSTALL NEW FLOORING THROUGHOUT UNIT.

THERE WILL BE NO ELECTRICAL OR HVAC WORK PERFORMED

PAINT THROUGHOUT.

JOHNNY BUENO



Windward Bay, Inc.
c/o Castle Management, LLC.
4888 Gulf Of Mexico Dr.
Long Boat Key FL 34228

Date: 9/30/2025 1:08:14 PM

Project Ref: [61337236] 4730 Gulf of Mexico Dr. #0003

Robert & Mary Gathman
18926 Crescent Road
Odessa FL 33556

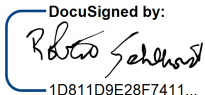
Dear **Robert & Mary Gathman**,

For the listed project item(s):

Interior Remodels

We wish to inform you that the Windward Bay, Inc. Architectural Committee is now waiting for the completion of this project. Please have it completed within the time specified in your CCRs and please let the committee know.

Please retain this letter in your files. If you have any questions regarding this matter, please contact our office at and

Sincerely, 1D811D9E28F7411...

On behalf of the ACC Committee
Windward Bay, Inc.



10/25/2025, 7:30:00 PM

BC-ALT-25-0244

Jane Herrin



Windward Bay, Inc.
c/o Castle Management, LLC.
4888 Gulf Of Mexico Dr.
Long Boat Key FL 34228

Date: September 30, 2025

Project Ref: [61337236] 4730 Gulf of Mexico Dr. #0003

Robert & Mary Gathman
18926 Crescent Road
Odessa FL 33556

RE: Interior Remodels

Dear **Robert & Mary Gathman**,

I am pleased to inform you that the **Windward Bay, Inc.** Architectural Committee has approved your application for the listed project item(s):

Interior Remodels

This approval should not be taken as to any certification as to the construction worthiness or structural integrity of the change you propose. Be aware that you are responsible for contacting the appropriate utility companies if you are doing any kind of digging. Owner is solely responsible for any damage caused to the common area by any contractors utilized during the course of the project. The homeowner also acknowledges and agrees that they will be solely responsible for determining whether the improvements, alterations or additions described herein comply with all applicable laws, rules and regulations, codes, and ordinances; including, without limitation, zoning ordinances, subdivision regulations, building codes, and appropriate permits. A copy of the permit obtained, if applicable, must be provided to the management office prior to the commencement of the project. A copy of the closed permit must be provided upon satisfactory completion of the project.

Please retain this letter for your files. If you have any questions regarding this matter, please contact the Management Office at or e-mail

10/25/2025, 7:30:00 PM

BC-ALT-25-0244
Signed by:

Sincerely,

Jane Herpin

1D811D9E28F7411...

Robert Sehlohorst - Board President

Windward Bay, Inc.



Windward Bay, Inc.
c/o Castle Management, LLC.
4888 Gulf Of Mexico Dr.
Long Boat Key, FL 34228

Date: September 29, 2025

Project Ref: [61337236] 4730 Gulf of Mexico Dr. #0003

Robert & Mary Gathman
18926 Crescent Road
Odessa FL 33556

Dear **Robert & Mary Gathman**,

We have received your **Interior Remodels** project request. It has been forwarded on to the **Windward Bay, Inc. Architectural Committee** for review. You should receive an email notification within 30 days with the approval or declined letter attached or a request for more information.

Please retain this letter for your files. If you have any questions regarding this matter, please contact the Management Office at or e-mail at mbillaouadil@castlegroup.com,

Sincerely,

Windward Bay, Inc.



10/25/2025, 7:30:00 PM

BC-ALT-25-0244

Jane Herrin



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/19/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION** IS **WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Ben Brown Insurance Agency 3731 S Tuttle Ave Sarasota FL 34239-6410		CONTACT NAME: Jessica Belvitch PHONE (A/C, No, Ext): (941) 487-3502 E-MAIL ADDRESS: certificates@benbrownins.com FAX (A/C, No): (941) 365-3143	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: National Trust Ins Co	
		INSURER B: Auto-Owners Insurance Co	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 24/25

REVISION NUMBER:

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	☒ COMMERCIAL GENERAL LIABILITY			GL100096363	11/07/2024	11/07/2025	EACH OCCURRENCE \$ 1,000,000	
	☐ CLAIMS-MADE ☒ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							MED EXP (Any one person) \$ 5,000
	☒ POLICY ☐ PRO-JECT ☐ LOC						PERSONAL & ADV INJURY \$ 1,000,000	
	OTHER:						GENERAL AGGREGATE \$ 2,000,000	
							PRODUCTS - COMP/OP AGG \$ 2,000,000	
							\$	
B	☒ AUTOMOBILE LIABILITY			5542757200	07/19/2025	07/19/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000	
	☐ ANY AUTO						BODILY INJURY (Per person) \$	
	☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS						BODILY INJURY (Per accident) \$	
	☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$	
							\$	
	UMBRELLA LIAB						EACH OCCURRENCE \$	
	EXCESS LIAB						AGGREGATE \$	
	DED						\$	
	RETENTION \$						\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT \$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$	
							E.L. DISEASE - POLICY LIMIT \$	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Indoor residential and commercial electrical.

CERTIFICATE HOLDER

CANCELLATION

Windward Bay, Inc. 4888 Gulf of Mexico Drive Longboat Key FL 34228	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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CERTIFICATE OF LIABILITY INSURANCE							Date 9/16/2025	
Producer: Plymouth Insurance Agency 2739 U.S. Highway 19 N. Holiday, FL 34691 (727) 938-5562				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.				
Insured: South East Personnel Leasing, Inc. & Subsidiaries 2739 U.S. Highway 19 N. Holiday, FL 34691				Insurers Affording Coverage			NAIC #	
				Insurer A: Lion Insurance Company			11075	
				Insurer B:				
				Insurer C:				
				Insurer D:				
				Insurer E:				
Coverages								
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. Aggregate limits shown may have been reduced by paid claims.								
INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date(MM/DD/YY)	Limits		
		GENERAL LIABILITY ☐ Commercial General Liability ☐ Claims Made ☐ Occur General aggregate limit applies per: ☐ Policy ☐ Project ☐ LOC				Each Occurrence	\$	
						Damage to rented premises (EA occurrence)	\$	
						Med Exp	\$	
						Personal Adv Injury	\$	
						General Aggregate	\$	
						Products - Comp/Op Agg	\$	
		AUTOMOBILE LIABILITY ☐ Any Auto ☐ All Owned Autos ☐ Scheduled Autos ☐ Hired Autos ☐ Non-Owned Autos				Combined Single Limit (EA Accident)	\$	
						Bodily Injury (Per Person)	\$	
						Bodily Injury (Per Accident)	\$	
						Property Damage (Per Accident)	\$	
		EXCESS/UMBRELLA LIABILITY ☐ Occur ☐ Claims Made Deductible				Each Occurrence		
						Aggregate		
A		Workers Compensation and Employers' Liability Any proprietor/partner/executive officer/member excluded? NO 10/25/2025, 7:30:00 PM If Yes, describe under special provisions below. BC-ALT-25-0244	WC 71949	01/01/2025	01/01/2026	☒ WC Statutory Limits	☐ OTH-ER	
						E.L. Each Accident	\$1,000,000	
						E.L. Disease - Ea Employee	\$1,000,000	
						E.L. Disease - Policy Limits	\$1,000,000	
Other		Jane Herrin		Lion Insurance Company is A.M. Best Company rated A (Excellent). AMB # 12616				
Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions: Client ID: 96-65-379								
Coverage only applies to active employee(s) of South East Personnel Leasing, Inc. & Subsidiaries that are leased to the following "Client Company": RNW Contractors Coverage only applies to injuries incurred by South East Personnel Leasing, Inc. & Subsidiaries active employee(s) , while working in: FL. Coverage does not apply to statutory employee(s) or independent contractor(s) of the Client Company or any other entity. A list of the active employee(s) leased to the Client Company can be obtained by emailing a request to certificates@lioninsurancecompany.com								
Project Name: ISSUE 09-16-25 (TD)								
Begin Date: 7/22/2024								
CERTIFICATE HOLDER WINDWARD BAY, INC. 4888 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228				CANCELLATION Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives. 				



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/18/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Automatic Data Processing Insurance Agency, Inc. 1 Adp Boulevard Roseland NJ 07068		CONTACT NAME: Automatic Data Processing Insurance Agency, Inc. PHONE (A/C, No. Ext): 1-800-524-7024 FAX (A/C, No): E-MAIL ADDRESS: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td colspan="2">INSURER A: Technology Insurance Company, Inc.</td> <td style="text-align: center;">42376</td> </tr> <tr> <td colspan="2">INSURER B:</td> <td></td> </tr> <tr> <td colspan="2">INSURER C:</td> <td></td> </tr> <tr> <td colspan="2">INSURER D:</td> <td></td> </tr> <tr> <td colspan="2">INSURER E:</td> <td></td> </tr> <tr> <td colspan="2">INSURER F:</td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A: Technology Insurance Company, Inc.		42376	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER C:																								
INSURER D:																								
INSURER E:																								
INSURER F:																								
INSURED TOP DOG PLUMBING LLC 3319 Narcissus Ter North Port FL 34286																								

COVERAGES**CERTIFICATE NUMBER:** 4552410**REVISION NUMBER:**

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC ☐ OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY ☐						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☒ Y / N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below BC-ALT-25-0244 Jane Herrin	N / A	N	TWC4656501	07/11/2025	07/11/2026	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

Windward Bay, Inc. 4888 Gulf of Mexico Dr Longboat Key FL 34228	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/16/2025

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IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION** IS **WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Atlas Insurance Agency 7120 Beneva Road Sarasota FL 34238	CONTACT NAME: Construction Certificates PHONE (A/C, No, Ext): 941-366-8424 FAX (A/C, No): E-MAIL ADDRESS: constructioncerts@atlasinsuranceagency.com														
INSURED RNW Contractors, LLC 2410 Valencia Dr Sarasota FL 34239	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td>INSURER A : James River Insurance Co</td> <td>12203</td> </tr> <tr> <td>INSURER B : INTEGON PREFERRED INS CO</td> <td>31488</td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : James River Insurance Co	12203	INSURER B : INTEGON PREFERRED INS CO	31488	INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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INSURER F :															

COVERAGES**CERTIFICATE NUMBER:** 525225657**REVISION NUMBER:**

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS														
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PROJECT ☐ LOC OTHER: ☐			P0000006116	3/15/2025	3/15/2026	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>EACH OCCURRENCE</td><td>\$ 1,000,000</td></tr> <tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td>\$ 100,000</td></tr> <tr><td>MED EXP (Any one person)</td><td>\$ 5,000</td></tr> <tr><td>PERSONAL & ADV INJURY</td><td>\$ 1,000,000</td></tr> <tr><td>GENERAL AGGREGATE</td><td>\$ 2,000,000</td></tr> <tr><td>PRODUCTS - COMP/OP AGG</td><td>\$ 2,000,000</td></tr> <tr><td></td><td>\$</td></tr> </table>	EACH OCCURRENCE	\$ 1,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	MED EXP (Any one person)	\$ 5,000	PERSONAL & ADV INJURY	\$ 1,000,000	GENERAL AGGREGATE	\$ 2,000,000	PRODUCTS - COMP/OP AGG	\$ 2,000,000		\$
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GENERAL AGGREGATE	\$ 2,000,000																				
PRODUCTS - COMP/OP AGG	\$ 2,000,000																				
	\$																				
B	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ HIRED AUTOS ONLY ☒ SCHEDULED AUTOS ☐ NON-OWNED AUTOS ONLY			2028343749	4/11/2025	4/11/2026	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td>\$ 1,000,000</td></tr> <tr><td>BODILY INJURY (Per person)</td><td>\$</td></tr> <tr><td>BODILY INJURY (Per accident)</td><td>\$</td></tr> <tr><td>PROPERTY DAMAGE (Per accident)</td><td>\$</td></tr> <tr><td></td><td>\$</td></tr> </table>	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)	\$		\$				
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	\$																				
A	☐ UMBRELLA LIAB ☒ EXCESS LIAB ☒ OCCUR ☐ CLAIMS-MADE DED RETENTION \$			00162264-0	3/15/2025	3/15/2026	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>EACH OCCURRENCE</td><td>\$ 1,000,000</td></tr> <tr><td>AGGREGATE</td><td>\$ 1,000,000</td></tr> <tr><td></td><td>\$</td></tr> </table>	EACH OCCURRENCE	\$ 1,000,000	AGGREGATE	\$ 1,000,000		\$								
EACH OCCURRENCE	\$ 1,000,000																				
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	\$																				
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☒ (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">PER STATUTE</td> <td style="width: 50%;">OTH-ER</td> </tr> <tr><td>E.L. EACH ACCIDENT</td><td>\$</td></tr> <tr><td>E.L. DISEASE - EA EMPLOYEE</td><td>\$</td></tr> <tr><td>E.L. DISEASE - POLICY LIMIT</td><td>\$</td></tr> </table>	PER STATUTE	OTH-ER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$						
PER STATUTE	OTH-ER																				
E.L. EACH ACCIDENT	\$																				
E.L. DISEASE - EA EMPLOYEE	\$																				
E.L. DISEASE - POLICY LIMIT	\$																				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Coverage is subject to policy forms, conditions & exclusions.

CERTIFICATE HOLDER**CANCELLATION**

Windward Bay, Inc.
 4888 Gulf of Mexico Dr
 Longboat Key FL 34228

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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HOWARD, ROBERT THOMAS

RNW CONTRACTORS LLC
2410 VALENCIA DR
SARASOTA FL 34239

LICENSE NUMBER: CGC1536504**EXPIRATION DATE: AUGUST 31, 2026**Always verify licenses online at MyFloridaLicense.com

ISSUED: 08/18/2024

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.

**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

2601 BLAIR STONE ROAD
TALLAHASSEE FL 32399-0783

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!

**STATE OF FLORIDA DEPARTMENT
OF BUSINESS AND PROFESSIONAL
REGULATION**

CGC1536504
CERTIFIED GENERAL CONTRACTOR
HOWARD, ROBERT THOMAS
RNW CONTRACTORS LLC

ISSUED: 08/18/2024

Signature

LICENSED UNDER CHAPTER 489, FLORIDA STATUTES
EXPIRATION DATE: AUGUST 31, 2026

Ron DeSantis, Governor

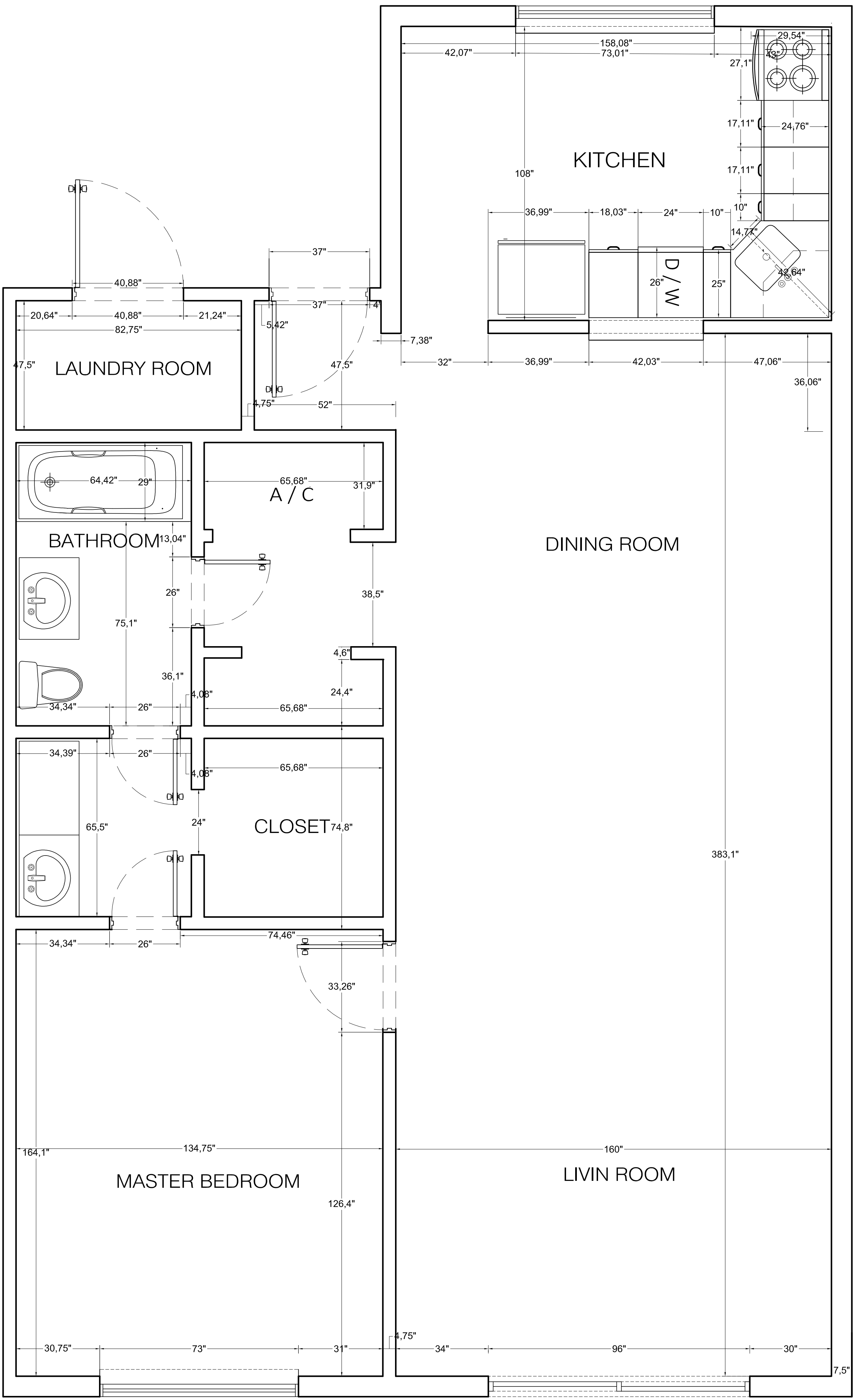
Melanie S. Griffin, Secretary

**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD****LICENSE NUMBER: CGC1536504****EXPIRATION DATE: AUGUST 31, 2026**

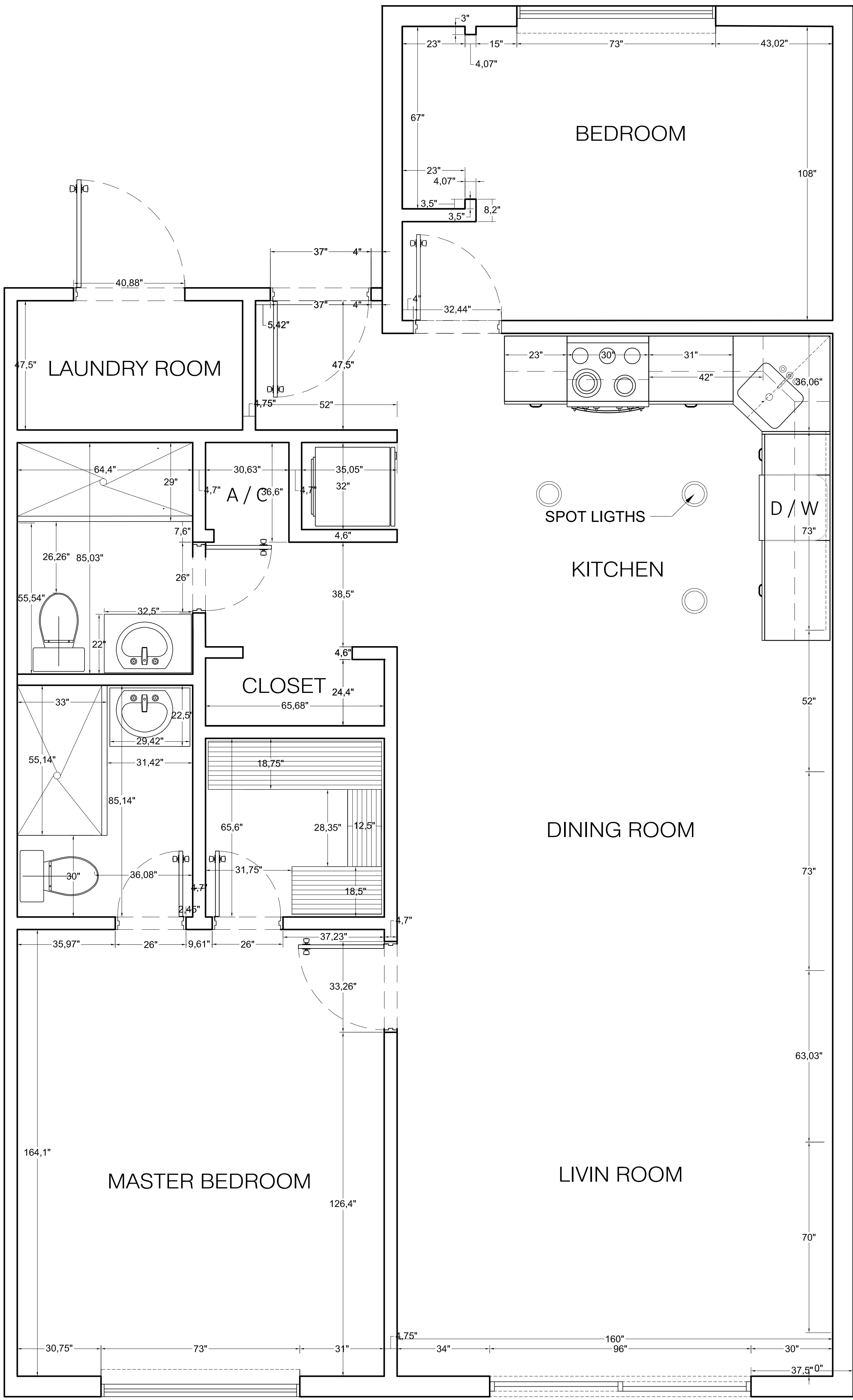
THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

HOWARD, ROBERT THOMAS
RNW CONTRACTORS LLC

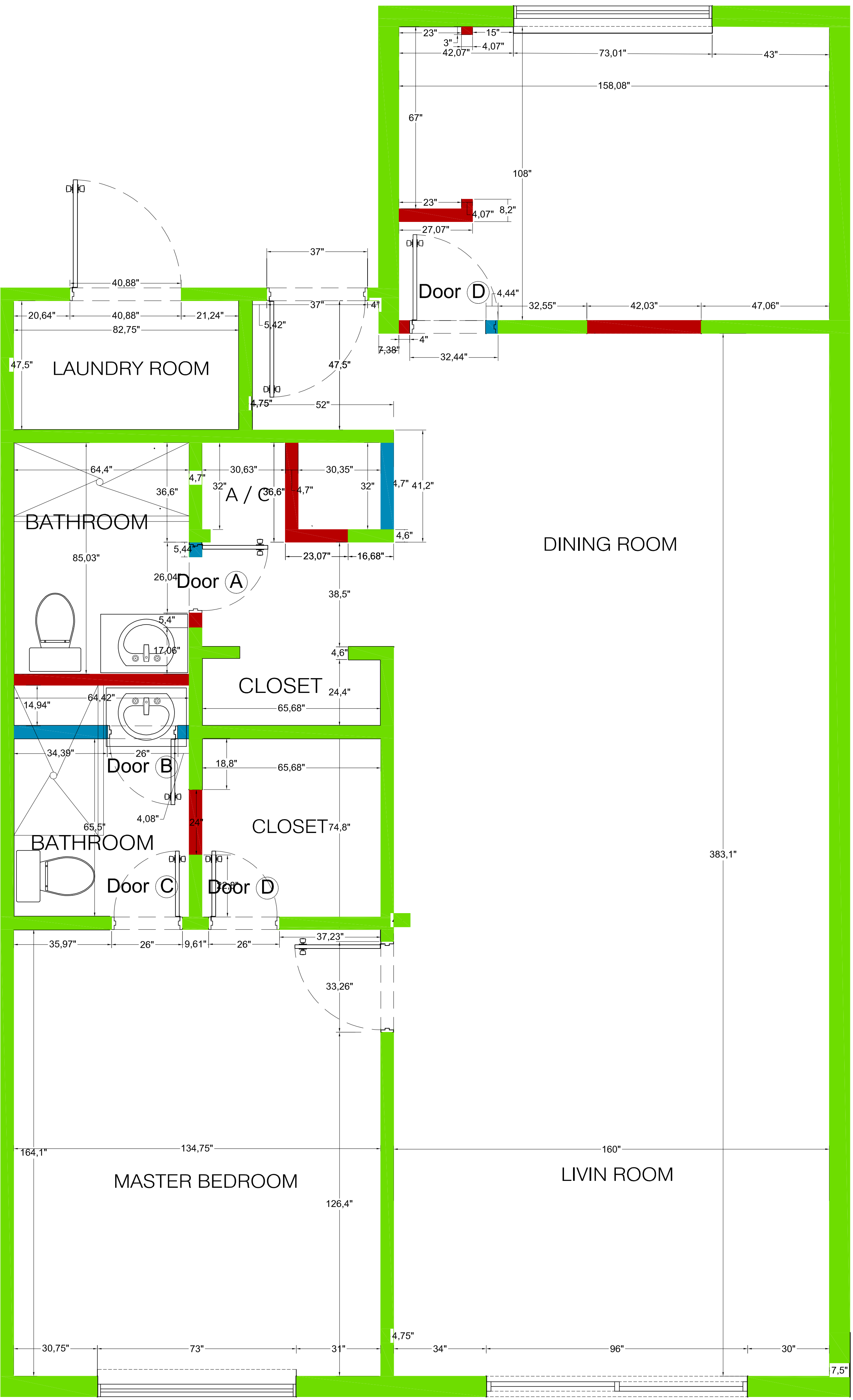




VILLA 3 EXISTENT



VILLA 3 PROPOSAL



VILLA 3 CHANGES

- | | | | |
|---|---------------------|--------|--------------------------------------|
|  | Existing Walls | Door Ⓐ | This door is the same, it just moves |
|  | Added Walls | Door Ⓑ | Remove |
|  | Walls to be removed | Door Ⓒ | Keep |
| | | Door Ⓓ | New |



Windward Bay, Inc.
c/o Castle Management, LLC.
4888 Gulf Of Mexico Dr.
Long Boat Key FL 34228

Date: September 30, 2025

Project Ref: [61337236] 4730 Gulf of Mexico Dr. #0003

Robert & Mary Gathman
18926 Crescent Road
Odessa FL 33556

RE: Interior Remodels

Dear **Robert & Mary Gathman**,

I am pleased to inform you that the **Windward Bay, Inc.** Architectural Committee has approved your application for the listed project item(s):

Interior Remodels

This approval should not be taken as to any certification as to the construction worthiness or structural integrity of the change you propose. Be aware that you are responsible for contacting the appropriate utility companies if you are doing any kind of digging. Owner is solely responsible for any damage caused to the common area by any contractors utilized during the course of the project. The homeowner also acknowledges and agrees that they will be solely responsible for determining whether the improvements, alterations or additions described herein comply with all applicable laws, rules and regulations, codes, and ordinances; including, without limitation, zoning ordinances, subdivision regulations, building codes, and appropriate permits. A copy of the permit obtained, if applicable, must be provided to the management office prior to the commencement of the project. A copy of the closed permit must be provided upon satisfactory completion of the project.

Please retain this letter for your files. If you have any questions regarding this matter, please contact the Management Office at or e-mail

Sincerely,

Windward Bay, Inc.

Windward Bay, Inc.
c/o Castle Management, LLC.
4888 Gulf Of Mexico Dr.
Long Boat Key FL 34228

Date: 9/30/2025 1:08:14 PM

Project Ref: [61337236] 4730 Gulf of Mexico Dr. #0003

Robert & Mary Gathman
18926 Crescent Road
Odessa FL 33556

Dear **Robert & Mary Gathman**,

For the listed project item(s):

Interior Remodels

We wish to inform you that the Windward Bay, Inc. Architectural Committee is now waiting for the completion of this project. Please have it completed within the time specified in your CCRs and please let the committee know.

Please retain this letter in your files. If you have any questions regarding this matter, please contact our office at and

Sincerely,

On behalf of the ACC Committee
Windward Bay, Inc.

COVER LETTER

Permit #: BC-ALT-25-0244

Address: 4730 Gulf of Mexico Dr, LBK FL

Contractor: RNW Contractors, LLC

Qualifier: Robert Howard, 2410 Valencia Dr, Sarasota FL 34239

License #: CGC1536504

Contact Info: 941-961-8503 / RNWContractors@gmail.com

Owner: Steve Gathman



11/6/2025, 11:46:03 PM

BC-ALT-25-0244

Debra Klahr

- The Florida Building Code (FBC) 2023 Design Criteria:
- Wind Load 150 MPH
- Risk Factor II
- Exposure Category D

PERMIT

PERMIT NUMBER:
BC-ALT-25-0244
PERMIT TYPE:
Commercial Alteration

ISSUED: 12/01/2025

ADDRESS: 4730 GULF OF MEXICO Dr, Longboat Key, FL 34228

USE: Commercial

WORK DESCRIPTION: Commerical Alteration

Drywall replacement, kitchen remodel, new floors and paint, bathroom remodel.

OWNER: GATHMAN MARY

CONTRACTOR: RNW CONTRACTORS, LLC

CONTRACTOR PHONE: **LICENSE:** CGC1536504

STIPULATIONS:

Note: Contractors/owners please contact your community association prior to start of any work.

IT IS THE RESPONSIBILITY OF PERMIT HOLDERS OF EACH PHASE OF WORK TO PROCURE INSPECTIONS AS REQUESTED AND TO VERIFY APPROVALS PRIOR TO PROCEEDING TO NEXT PHASE.

For demolition permits, all required pre-inspections for electrical, plumbing, and NPDES must be scheduled before Demolition begins.

NOTICE (Fla. Statute 553.79(10): In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of the county, and there may be additional permits required from this or other governmental entities such as water management districts, state or federal agencies.

PERMITS FOR DEMOLITIONS OR RENOVATIONS OF AN EXISTING STRUCTURE: This is notification of the owners or owner's representative's responsibility to comply with provisions of s. 469.003 Florida Statutes printed below, regarding Asbestos Abatement and to notify the Department of Environmental Protection of your intentions to remove asbestos, when applicable, in accordance with the state and federal law.

F.S. 469, Asbestos Abatement. 469.003 License Required

(1) No person may conduct an asbestos survey, develop an operation and maintenance plan, or monitor and evaluate asbestos abatement unless trained and licensed as an asbestos consultant as required by this chapter.

(2) No person may prepare asbestos abatement specifications unless trained and licensed as an asbestos consultant as required by this chapter.

(3) No person may contact the department under this chapter as an asbestos contractor, except as otherwise provided in this chapter.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

130.02(C) Unreasonable Sound Prohibited

(2)(f) Construction and demolition. Engaging in construction or demolition on Sunday, on any holiday, or between the hours of 5:00 p.m. and 8:00 a.m. Monday through Saturday except for emergency work by a public service utility or by other permit approved by the town This sub section shall not apply to the use of domestic power tools as specified in subsection (i) of this section.

PARKING INFORMATION

For properties along Gulf of Mexico Drive:

Parking along the entire length of Gulf of Mexico Drive is prohibited. Vehicles that are parked along either side of Gulf of Mexico Drive are subject to a \$75 parking citation.

For properties in the Village:

Service Vehicles (a “vehicle with a business sign or logo owned and operated by a person, firm or corporation actively engaged in a service or business activity at the home of Resident within the Resident-Only Parking Permit area”) can park on Village streets that allow Resident-Only Parking. Service vehicles are encouraged to use Resident-Only spaces rather than parking in the limited publicly available parking spaces.

**PERMIT MUST BE POSTED IN A CONSPICUOUS LOCATION VIEWABLE FROM ROAD.
INSPECTION REQUESTS REQUIRED AT LEAST 24 HOURS IN ADVANCE.
REQUESTS: 941-316-1966**

Town of Longboat Key - Planning, Zoning & Building - 501 Bay Isles Road, Longboat Key, FL 34228 - 941-316-1966 F: 941-316-1970