

Countryside Homeowners Association, Inc. (CSHOA)

OFFICIAL DIRECTIVE PROXY FOR THE ANNUAL MEETING OF The Countryside Homeowners' Association On March 11th 2010

1. No other proxy except this Board-prescribed proxy will be recognized or accepted
2. Participating members must be current with their assessment dues for their vote to be counted.
3. Only ONE proxy per owner/member may be submitted.
4. This proxy **must be received** for validation by the CSHOA Secretary c/o Omni Management Services, Inc.
By mail: 4138 North Keystone Avenue, Indianapolis, IN 46205
Or fax: (317) 541-0002

No later than 12:00 noon on Wednesday March 10, 2010

Proxy Authorization:

I, the legal owner/member of the Countryside Homeowners' Association and in good standing do hereby designate and delegate my/our vote to,

Neighbor Name (print): _____ Neighbor Street Address: _____

Neighbor Signature: _____ Date: _____

or if no person is heretofore designated above, Richie Pfeiffer the current CSHOA Secretary.

Also being a legal owner/member of the Association and in good standing, to vote on my/our behalf (per my directive below) at the Annual Meeting of The Countryside Homeowners' Association presently scheduled to be held on the date set forth above with full power to vote and act for me and in my name, place and stead, in the same manner, to the same extent and with the same effect that I might were I personally present at such meeting, with full power of substitution. This proxy may be revoked by me at any time by my giving written notice of such revocation to my proxy, or to the Secretary of the Association, at or before the scheduled meeting. In the event I am present at the meeting herein designated or any continuation thereof, this proxy, at my sole discretion, shall be null and void, and I can exercise my own vote and participate at the meeting.

**I hereby direct my proxy holder to vote for the following candidate(s) for the
CSHOA Board of Directors (vote for up to 5).**

Beaudry, Bob _____ **Pittman, Chad** _____

Bluto, Christopher _____ **Stump, David** _____

Boller, Jeff _____ **Warren, Sheldon** _____

Morales, Brian _____

Write In Candidate(s): _____

My Name (print): _____ My Street Address: _____

My Signature: _____ Date: _____

CSHOA Secretary: Richie Pfeiffer

CSHOA Secretary Signature: _____ Date: _____