

# ***Eastlake Oaks Community Development District***

**October 8, 2026**

## **Agenda Package**

### **TEAMS MEETING INFORMATION**

**Meeting ID: 228 559 855 891 858**

**Passcode: VS2Kh7og**

[Join the meeting](#)

2005 Pan Am Circle, Suite 300  
Tampa, FL 33607

## **CLEAR PARTNERSHIPS**



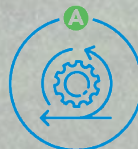
**COLLABORATION**



**LEADERSHIP**



**EXCELLENCE**



**ACCOUNTABILITY**



**RESPECT**

# Eastlake Oaks Community Development District

## Board of Supervisors

Scott Roper, Chairman  
Darlene Lazier, Vice Chairperson  
Nick Yagnik, Assistant Secretary  
Joshua Main, Assistant Secretary  
Joseph Dinelli, Assistant Secretary

## District Staff

Christina Newsome, District Manager  
Andrew Cohen, District Counsel  
Tonja Stewart, District Engineer  
Elizabeth Coons, District Accountant  
Diana Kapatsyna, District Admin

## Regular Meeting Agenda

Thursday, October 8, 2026, at 6:00 p.m.

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The Regular Meeting of the **Eastlake Oaks Community Development District** will be held on **October 8, 2026, at 6:00 p.m.** at the **City of Oldsmar, Fire Station Meeting Room**, located at **225 Pine Avenue North, Oldsmar Florida 34677**.

## THE REGULAR MEETING OF BOARD OF SUPERVISORS

### 1. CALL TO ORDER/ROLL CALL

### 2. PLEDGE OF ALLEGIANCE

### 3. PUBLIC COMMENTS

*(Each individual has the opportunity to comment and is limited to three (3) minutes for such comment)*

### 4. BUSINESS ITEMS

A. Review of Irrigation Reports

### 5. CONSENT AGENDA

A. Consideration of Minutes from the Meeting held on August 13, 2026

B. Review of Financials

C. Review of Snapshot

### 6. STAFF REPORTS

A. District Counsel

B. District Engineer

C. Aquatics Report

D. District Manager

### 7. BOARD OF SUPERVISORS REQUESTS AND COMMENTS

### 8. ADJOURNMENT

**Emailed 8/26/26**

Date: 8/25

**Irrigation Inspection Form**

Tech Name: Bill

Location: E10

Arrival: AM PM (Circle One) Departure: AM PM (Circle One)

Customer: \_\_\_\_\_

Start Times 10pm  
12 AM 6 AM

Address: Timothy (man)

Run Days: A. M/W/F B. \_\_\_\_\_ C. \_\_\_\_\_  
Tu, Sa W, F

Box #1-3

| Zone #        | Zone Type | Program | Run Time | Notes                |
|---------------|-----------|---------|----------|----------------------|
| 1             | R         | H       | 18       | ok                   |
| 2             | R         |         | ↑        | ok                   |
| 3             | R         |         |          | ok                   |
| 4             | R/S       |         |          | ok                   |
| 5             | S         |         |          | ok                   |
| 6             | S         |         |          | ok                   |
| 7             | S         |         |          | ok                   |
| 8             | S         |         |          | ok                   |
| 9             | R/S       |         |          | ok                   |
| 10            | R/S       | H       | 18       | ok                   |
| <u>Box #1</u> |           |         |          |                      |
| 1             | R         | R       | 40       | 9pm Tu/Thurs<br>ok   |
| 2             | R         | A       | 40       | ok                   |
| <u>Box #2</u> |           |         |          |                      |
| 1             | R         | A       | 40       | 11pm Tu/Thurs<br>ok  |
| <u>Box #3</u> |           |         |          |                      |
| 1             | R/S       | H       | 20       | 12 AM Tu/Thurs<br>ok |

Date: 9/18

**Irrigation Inspection Form**

Location: ELO

Tech Name: Bill

Arrival: AM PM Departure: AM PM  
(Circle One) (Circle One)

Customer: \_\_\_\_\_

Start Times: 1:00 6:00  
12:00 6:00

Address: Timer #1 (main)  
Box 1-

Run Days: A M/T/W/Th B. \_\_\_\_\_ C. \_\_\_\_\_  
Tu, Sa We, F

| Zone # | Zone Type | Program | Run Time | Notes |
|--------|-----------|---------|----------|-------|
| 1      | R         | A       | 18       | ok    |
| 2      | R         | ↑       | ↑        | ok    |
| 3      | R         | ↑       | ↑        | ok    |
| 4      | R/S       | ↑       | ↑        | ok    |
| 5      | S         | ↑       | ↑        | ok    |
| 6      | R/S       | ↑       | ↑        | ok    |
| 7      | S         | ↑       | ↑        | ok    |
| 8      | S         | ↑       | ↑        | ok    |
| 9      | R/S       | ↓       | ↓        | ok    |
| 10     | R/S       | H       | 18       | ok    |

|        |     |   |    |                 |
|--------|-----|---|----|-----------------|
| Box #1 |     |   |    |                 |
| 1      | S   | A | 30 | 9 pm M/Th<br>ok |
| 2      | R/S | A | 30 | ok              |

|        |   |   |    |                  |
|--------|---|---|----|------------------|
| Box #2 |   |   |    |                  |
| 1      | R | H | 60 | 10 pm M/Th<br>ok |

|        |   |   |    |                  |
|--------|---|---|----|------------------|
| Box #3 |   |   |    |                  |
| 1      | R | H | 60 | 11 pm M/Th<br>ok |

# Alexander's

PROPERTY MAINTENANCE  
INC.

LANDSCAPE CONTRACTOR

Corporate Office  
6400 123rd Avenue N  
Largo, FL 33773

T: 727.535.7314  
F: 727.532.6939  
info@alexanderspm.com  
www.alexanderspm.com



|                       | Preventative<br>Treatments | Control Treatment<br>(Activity Noted) | Inspection (No treatment<br>needed at this time) |
|-----------------------|----------------------------|---------------------------------------|--------------------------------------------------|
| Chinch Bugs           | <input type="checkbox"/>   | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Mole Crickets         | <input type="checkbox"/>   | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Grubs                 | <input type="checkbox"/>   | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Fire Ants             | <input type="checkbox"/>   | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Army-Sod Web Worms    | <input type="checkbox"/>   | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Fleas                 | <input type="checkbox"/>   | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Other <i>Green up</i> | <input type="checkbox"/>   | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Grassy Weeds          | <input type="checkbox"/>   | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Sedge Weeds           | <input type="checkbox"/>   | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Broadleaf Weeds       | <input type="checkbox"/>   | <input checked="" type="checkbox"/>   | <input type="checkbox"/>                         |

## WATERING INSTRUCTIONS FOR THIS TREATMENT

- |                                                                                              |                                                                 |
|----------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <input checked="" type="checkbox"/> Water as soon as possible                                | <input type="checkbox"/> Delay watering 2-24 hours, then water  |
| <input checked="" type="checkbox"/> Stay on normal watering cycle                            | <input type="checkbox"/> Delay watering until after tomorrow am |
| <input type="checkbox"/> Today's rain will meet the watering requirements for this treatment | <input type="checkbox"/> Water only at first sign of wilt       |
|                                                                                              | <input type="checkbox"/> Other:                                 |

## SHRUB, PALM & TREE CARE

- |                                                            |                                                                 |
|------------------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> Shrub Inspections                 | <input type="checkbox"/> Tree Spray for Insects & Disease       |
| <input type="checkbox"/> Shrub Care for Insects & Disease  | <input type="checkbox"/> Tree Fertilizer                        |
| <input type="checkbox"/> Shrub Fertilizer                  | <input type="checkbox"/> Tree injection, do not remove capsules |
| <input type="checkbox"/> Palm Bud Drench                   | <input type="checkbox"/> Other:                                 |
| <input type="checkbox"/> Palm Spray for Insects & Diseases |                                                                 |

## LAWN CARE

Customer *East Lake Oaks*

Service \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

**Emailed 9/4/26**

## A NOTE FROM YOUR SPECIALIST

Existing conditions:

*Applied a green up treatment to treated minor weeds*

What You Can Expect:

What I Recommend:

FOLLOW UP DATE:

| Application Date              | Time                                                                                                                        | Temp | Truck # | Wind | Wind Speed |
|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------|------|---------|------|------------|
| <i>8-28-26</i>                |                                                                                                                             |      |         | N    | 0 - 5      |
| Specialist<br><i>Walter S</i> |                                                                                                                             |      |         | W E  | 6 - 10     |
| Square Feet Treated           | Area Treated                                                                                                                |      |         | S    | 11 - 15    |
|                               | <input checked="" type="checkbox"/> Front <input checked="" type="checkbox"/> Back <input checked="" type="checkbox"/> Side |      |         |      |            |

## MATERIALS APPLIED

| Fertilizer                         | N | P                                           | K |                                                  |
|------------------------------------|---|---------------------------------------------|---|--------------------------------------------------|
| lbs                                |   |                                             |   | Granular slow release<br>Poly sulfur coated urea |
| <input type="checkbox"/> Iron Plus |   | <input type="checkbox"/> Chelated Iron Plus |   |                                                  |
| <input type="checkbox"/> Other     |   | <input type="checkbox"/> Chelated micro mix |   |                                                  |

## CONTROL MATERIALS

|                                       | %    | Quantity |                                           | %     | Quantity |
|---------------------------------------|------|----------|-------------------------------------------|-------|----------|
| <input type="checkbox"/> Permethrin   | 0.05 |          | <input type="checkbox"/> Manicure         |       |          |
| <input type="checkbox"/> Dylox        | 6.2  | lbs.     | <input type="checkbox"/> Octane           |       |          |
| <input type="checkbox"/> Meridian     |      |          | <input type="checkbox"/> Mansion          |       |          |
| <input type="checkbox"/> Bifenthrin   |      |          | <input type="checkbox"/> Quicksilver      |       |          |
| <input type="checkbox"/> Imadacloprid |      |          | <input type="checkbox"/> Blade            |       |          |
| <input type="checkbox"/> Lesco Wet    |      |          | <input type="checkbox"/> Atraine          |       |          |
| <input type="checkbox"/> Allectus     |      |          | <input type="checkbox"/> Spreader Sticker |       |          |
| <input type="checkbox"/> Tempo        |      |          | <input type="checkbox"/> Top Choice       | 0.014 | lbs.     |
| <input type="checkbox"/> Manor        |      |          | <input type="checkbox"/> Pre-M            |       |          |
| <input type="checkbox"/>              |      |          | <input type="checkbox"/> Roundup          |       |          |
| <input type="checkbox"/>              |      |          | <input type="checkbox"/>                  |       |          |

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|                        | Preventative<br>Treatments          | Control Treatment<br>(Activity Noted) | Inspection (No treatment<br>needed at this time) |
|------------------------|-------------------------------------|---------------------------------------|--------------------------------------------------|
| Chinch Bugs            | <input type="checkbox"/>            | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Mole Crickets          | <input type="checkbox"/>            | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Grubs                  | <input type="checkbox"/>            | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Fire Ants              | <input type="checkbox"/>            | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Army-Sod Web Worms     | <input type="checkbox"/>            | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Fleas                  | <input type="checkbox"/>            | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Other <i>Fungicide</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Grassy Weeds           | <input type="checkbox"/>            | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Sedge Weeds            | <input type="checkbox"/>            | <input type="checkbox"/>              | <input type="checkbox"/>                         |
| Broadleaf Weeds        | <input type="checkbox"/>            | <input type="checkbox"/>              | <input type="checkbox"/>                         |

## WATERING INSTRUCTIONS FOR THIS TREATMENT

- ☐ Water as soon as possible      ☐ Delay watering 2-24 hours, then water  
☐ Stay on normal watering cycle      ☐ Delay watering until after tomorrow am  
☒ Today's rain will meet the watering requirements for this treatment      ☐ Water only at first sign of wilt  
☐ Other:

## SHRUB, PALM & TREE CARE

- ☐ Shrub Inspections      ☐ Tree Spray for Insects & Disease  
☐ Shrub Care for Insects & Disease      ☐ Tree Fertilizer  
☐ Shrub Fertilizer      ☐ Tree injection, do not remove capsules  
☐ Palm Bud Drench      ☐ Other:  
☐ Palm Spray for Insects & Diseases

## LAWN CARE

Customer East lake Woodlands

Service pc

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

**Emailed 9/23/26**

## A NOTE FROM YOUR SPECIALIST

Existing conditions:

*Treated areas of new seed*

What You Can Expect:

What I Recommend:

FOLLOW UP DATE:

| Application Date             | Time                                                                                                                        | Temp | Truck # | Wind | Wind Speed |
|------------------------------|-----------------------------------------------------------------------------------------------------------------------------|------|---------|------|------------|
| <i>9-21-26</i>               |                                                                                                                             |      |         | N    | 0 - 5      |
| Specialist<br><i>Winters</i> |                                                                                                                             |      |         | W E  | 6 - 10     |
| Square Feet Treated          | Area Treated                                                                                                                |      |         | S    | 11 - 15    |
|                              | <input checked="" type="checkbox"/> Front <input checked="" type="checkbox"/> Back <input checked="" type="checkbox"/> Side |      |         |      |            |

## MATERIALS APPLIED

| Fertilizer                         | N                        | P                                           | K |                                                  |
|------------------------------------|--------------------------|---------------------------------------------|---|--------------------------------------------------|
| lbs                                |                          |                                             |   | Granular slow release<br>Poly sulfur coated urea |
| <input type="checkbox"/> Iron Plus | <input type="checkbox"/> | <input type="checkbox"/> Chelated Iron Plus |   |                                                  |
| <input type="checkbox"/> Other     | <input type="checkbox"/> | <input type="checkbox"/> Chelated micro mix |   |                                                  |

## CONTROL MATERIALS

|                                       | %    | Quantity |                                           | %     | Quantity |
|---------------------------------------|------|----------|-------------------------------------------|-------|----------|
| <input type="checkbox"/> Permethrin   | 0.05 |          | <input type="checkbox"/> Manicure         |       |          |
| <input type="checkbox"/> Dylox        | 6.2  | lbs.     | <input type="checkbox"/> Octane           |       |          |
| <input type="checkbox"/> Meridian     |      |          | <input type="checkbox"/> Mansion          |       |          |
| <input type="checkbox"/> Bifenthrin   |      |          | <input type="checkbox"/> Quicksilver      |       |          |
| <input type="checkbox"/> Imadacloprid |      |          | <input type="checkbox"/> Blade            |       |          |
| <input type="checkbox"/> Lesco Wet    |      |          | <input type="checkbox"/> Atraine          |       |          |
| <input type="checkbox"/> Allectus     |      |          | <input type="checkbox"/> Spreader Sticker |       |          |
| <input type="checkbox"/> Tempo        |      |          | <input type="checkbox"/> Top Choice       | 0.014 | lbs.     |
| <input type="checkbox"/> Manor        |      |          | <input type="checkbox"/> Pre-M            |       |          |
| <input type="checkbox"/>              |      |          | <input type="checkbox"/> Roundup          |       |          |
| <input type="checkbox"/>              |      |          | <input type="checkbox"/>                  |       |          |



LANDSCAPE CONTRACTOR

## Corporate Office

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F: (727) 532-6939

info@alexanderspm.com

www.alexanderspm.com

Emailed 9/28/26

## A NOTE FROM YOUR SPECIALIST

Existing Conditions:

Sprayed the pro vists for turf weeds with Glyphosate

What You Can Expect:

What I Recommend:

Follow-Up Date:

|                     |                                                                                            |      |         |      |                      |
|---------------------|--------------------------------------------------------------------------------------------|------|---------|------|----------------------|
| Application Date    | Time                                                                                       | Temp | Truck # | Wind | Wind Speed           |
| 9/24/26             |                                                                                            |      |         | N    |                      |
| Specialist          | Carlos                                                                                     |      |         | W    | E                    |
| Square Feet Treated | Area Treated                                                                               |      |         | S    |                      |
|                     | <input type="checkbox"/> Front <input type="checkbox"/> Back <input type="checkbox"/> Side |      |         |      | 0-5<br>6-10<br>11-15 |

## MATERIALS APPLIED

|                                                                      |                                                                                            |   |   |                                                  |
|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------|---|---|--------------------------------------------------|
| Fertilizer                                                           | N                                                                                          | P | K | Granular slow release<br>Poly sulfur coated urea |
| lbs                                                                  |                                                                                            |   |   |                                                  |
| <input type="checkbox"/> Iron Plus<br><input type="checkbox"/> Other | <input type="checkbox"/> Chelated Iron Plus<br><input type="checkbox"/> Chelated Micro Mix |   |   |                                                  |

## WATERING INSTRUCTIONS FOR THIS TREATMENT

- |                                                                                              |                                                                 |
|----------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> Water as soon as possible                                           | <input type="checkbox"/> Delay watering 2-24 hours, then water  |
| <input type="checkbox"/> Stay on normal watering cycle                                       | <input type="checkbox"/> Delay watering until after tomorrow am |
| <input type="checkbox"/> Today's rain will meet the watering requirements for this treatment | <input type="checkbox"/> Water only at first sign of wilt       |
|                                                                                              | <input type="checkbox"/> Other:                                 |

## SHRUB, PLAM, &amp; TREE CARE

- |                                                           |                                                                  |
|-----------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> Shrub Inspections                | <input type="checkbox"/> Tree Spray for Insects & Disease        |
| <input type="checkbox"/> Shrub Care for Insects & Disease | <input type="checkbox"/> Tree Fertilizer                         |
| <input type="checkbox"/> Shrub Fertilizer                 | <input type="checkbox"/> Tree Injection - Do Not Remove Capsules |
| <input type="checkbox"/> Palm Bud Drench                  | <input type="checkbox"/> Other:                                  |
| <input type="checkbox"/> Palm Spray for Insects & Disease |                                                                  |

## LAWN CARE

Customer Eastlake Oaks

Service \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

## CONTROL MATERIALS

|                                       | %    | Quantity |                                           | %     | Quantity |
|---------------------------------------|------|----------|-------------------------------------------|-------|----------|
| <input type="checkbox"/> Permethrin   | 0.05 |          | <input type="checkbox"/> Manicure         |       |          |
| <input type="checkbox"/> Dylox        | 6.2  | lbs.     | <input type="checkbox"/> Octane           |       |          |
| <input type="checkbox"/> Meridian     |      |          | <input type="checkbox"/> Mansion          |       |          |
| <input type="checkbox"/> Bifenthrin   |      |          | <input type="checkbox"/> Quicksilver      |       |          |
| <input type="checkbox"/> Imadacloprid |      |          | <input type="checkbox"/> Blade            |       |          |
| <input type="checkbox"/> Lesco Wet    |      |          | <input type="checkbox"/> Atraine          |       |          |
| <input type="checkbox"/> Allectus     |      |          | <input type="checkbox"/> Spreader Sticker |       |          |
| <input type="checkbox"/> Tempo        |      |          | <input type="checkbox"/> Top Choice       | 0.014 | lbs.     |
| <input type="checkbox"/> Manor        |      |          | <input type="checkbox"/> Pre-M            |       |          |
| <input type="checkbox"/>              |      |          | <input type="checkbox"/> Roundup          |       |          |
| <input type="checkbox"/>              |      |          | <input type="checkbox"/>                  |       |          |
| <input type="checkbox"/>              |      |          | <input type="checkbox"/>                  |       |          |
| <input type="checkbox"/>              |      |          | <input type="checkbox"/>                  |       |          |

**MINUTES OF MEETING  
EASTLAKE OAKS  
COMMUNITY DEVELOPMENT DISTRICT**

The regular meeting of the Board of Supervisors of the Eastlake Oaks Community Development District was held Thursday, August 13, 2026, at 6:00 p.m. at the Oldsmar Public Library, in TECO Hall, at 400 Saint Petersburg Drive E, Oldsmar, FL, 34677.

Present and constituting a quorum were:

|                |                     |
|----------------|---------------------|
| Scott Roper    | Chairperson         |
| Darlene Lazier | Vice Chairperson    |
| Nick Yagnik    | Assistant Secretary |
| Joshua Main    | Assistant Secretary |

Also present, either in person or via communication media technology, were:  
Christina Newsome District Manager

*This is not a certified or verbatim transcript but rather represents the context and summary of the meeting. The full meeting is available in audio format upon request. Contact the District Office for any related costs for an audio copy.*

**FIRST ORDER OF BUSINESS**

**Call to Order and Roll Call**

Ms. Newsome called the meeting to order, and a quorum was established.

**SECOND ORDER OF BUSINESS**

**Approval of Agenda**

The Board approved the June 11, 2026, agenda.

The Pledge of Allegiance was recited.

**THIRD ORDER OF BUSINESS**

**Public Comments**

There being none, the order of business followed.

**FOURTH ORDER OF BUSINESS**

**Business Items**

**A. Review of Irrigation Report**

The Board reviewed the irrigation report.

**B. Public Hearing on the Fiscal Year 2026-2027 Final Budget and Levying the O&M Assessment**

|                                                                                               |
|-----------------------------------------------------------------------------------------------|
| On MOTION by Mr. Roper, second by Mr. Lazier, the Board approved the open Public Hearing. 4-0 |
|-----------------------------------------------------------------------------------------------|

|                                                                                                 |
|-------------------------------------------------------------------------------------------------|
| On MOTION by Mr. Lazier, second by Mr. Yagnik, the Board approved the close Public Hearing. 4-0 |
|-------------------------------------------------------------------------------------------------|

**i. Consideration of Resolution 2026-04; Adopting Final Budget for FY 2027**

On MOTION by Mr. Yagnik, seconded by Mr. Main, with all in favor, the Resolution 2026-04; Adopting Final Budget for FY 2027. (4-0)

**ii. Consideration of Resolution 2026-05; Levying O&M Assessments**

On MOTION by Mr. Roper, seconded by Mr. Main, with all in favor, the Resolution 2026-05; Levying O&M Assessments was approved. (4-0)

**C. Consideration of Resolution 2026-06; Goals and Objectives**

On MOTION by Mr. Roper, seconded by Mr. Main, with all in favor, the Resolution 2026-06; Goals and Objectives was approved. (4-0)

**D. Consideration of Resolution 2026-07; Setting FY 2027 Annual Meeting Schedule**

On MOTION by Mr. Main, seconded by Mr. Lazier, with all in favor, the Resolution 2026-07; Setting FY 2027 Annual Meeting Schedule was approved. (4-0)

**E. Consideration of Website Updates Proposal**

On MOTION by Mr. Main, seconded by Mr. Main, with all in favor, the Website Updates Proposal in the amount of \$408.50 was approved. (4-0)

**FIFTH ORDER OF BUSINESS                      Business Administration**

**A. Consideration of Minutes from the Meeting held on June 11, 2026**

**B. Financials (May 2026 & June 2026 & July 2026)**

**C. Review of Snapshot**

On MOTION by Mr. Lazier, seconded by Mr. Yagnik, with all in favor, the Minutes from the meeting held on June 11, 2026 and the Financials were approved. (4-0)

**SIXTH ORDER OF BUSINESS                      Staff Reports**

**A. District Counsel**

There were no updates for the Board at this time.

### B. District Engineer

There were no updates for the Board at this time.

### C. Aquatics Report

The Board reviewed the aquatic report.

### D. District Manager

Ms. Newsome stated that they are working with FDOT on the necessary repairs.

**SEVENTH ORDER OF BUSINESS**                      **Supervisor's Requests**

There being none, the order of business followed.

**EIGHTH ORDER OF BUSINESS** **Adjournment**

There being no further business,

On MOTION by Mr. Main, seconded by Mr. Yagnik, with all in favor, the meeting was adjourned at 6:26 p.m. (4-0)

Scott Roper  
Chairperson

***Eastlakes Oaks  
Community  
Development  
District***

***Financial Report***

***August 31, 2026***

**CLEAR PARTNERSHIPS**



COLLABORATION



LEADERSHIP



EXCELLENCE



ACCOUNTABILITY



RESPECT

# EASTLAKES OAKS COMMUNITY DEVELOPMENT DISTRICT

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## Financial Snapshot September 30, 2026

- **Current Cash Balances:**
  - o Valley National Bank Operating: \$278,721.59
- **Assessment collections:**
  - o We are 100% fully collected on the tax roll
- **Expenses:**
  - o Current expenses make up 94% of the annual budget through the end of September 30, 2026
  - o Total expenses for the first 12 months and one day, approximately \$251,793. This figure may change as we finalize the September financials
  - o We need an **Amendment for FY 2026** because the current budget exceeds the amount originally budgeted. I will prepare the amendment based on the September financials.