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Printed for Lawyers' Title Guaranty Fund, Orlando, Florida

This instrument was prepared by:

Name WILLIAM H. WEBSTER, PA

Address P.O. Box 478

Crawfordville, FL 32327

Warranty Deed (STATUTORY FORM—SECTION 689.02 F.S.)

This Indenture, Made this 23rd day of January 19 89, Between

BILLY C. HUDSON, individually and as surviving spouse of
NANCY E. HUDSON
of the County of Wakulla, State of Florida, grantor*, and

NICKOLAS P. CHILIVIS

whose post office address is 3127 Maple Drive, N.E., Atlanta, GA 30305

of the County of _____, State of Georgia, grantee*,

Witnesseth. That said grantor, for and in consideration of the sum of TEN AND NO/100-----

----- Dollars,
and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Wakulla County, Florida, to-wit:

All of his one-fifth (1/5) undivided interest in and to:

Lot Number Five (5) in Section "D" of Ochlockonee Shore Subdivision as shown by plats of said subdivision of record on Pages 16 and 17 of Plat Book No. 1 of the public records of Wakulla County, Florida.

SUBJECT to restrictions and reservations recorded in Deed Book 40, Page 215 of the public records of Wakulla County, Florida.

SUBJECT to real property and special assessment taxes for 1989 and all subsequent years.

Documentary Stamps Paid \$ 2.25
Date 1/23/89 Wakulla County,
Florida. J. Harold Thurmond, Clerk of
Circuit Court.
By Rebecca Kay Strickland
Deputy Clerk

RECORDED
AT TIME & DATE NOTED
1989 FEB 10 PM 1:43
J. HAROLD THURMOND
CLERK CIRCUIT COURT
WAKULLA COUNTY FLORIDA

and said grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

* "Grantor" and "grantee" are used for singular or plural, as context requires.

In Witness Whereof, Grantor has hereunto set grantor's hand and seal the day and year first above written. Signed, sealed and delivered in our presence:

Rebecca Kay Strickland
Rebecca Kay Strickland

Billy C. Hudson (Seal)
BILLY C. HUDSON, individually (Seal)
and as surviving spouse of (Seal)
NANCY E. HUDSON (Seal)

STATE OF FLORIDA
COUNTY OF WAKULLA

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared BILLY C. HUDSON, individually and as surviving spouse of
NANCY E. HUDSON
to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 23rd day of January 19 89



Notary Public, State of Florida
My Commission Expires Aug. 31, 1991
Bonded Thru Troy Fain - Insurance Inc.

Rebecca Kay Strickland
Notary Public

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Lex

CERTIFICATE OF DEATH - STATE OF GEORGIA		REGISTRATION No. 7134	
1. DECEASED NAME (Last, First, Middle Initial) Nancy Ellen HUDSON		DATE OF DEATH (Mo., Day, Year) September 26, 1986	
2. SEX Female		3. COUNTY OF DEATH Fulton	
4. RACE White		5. DATE OF BIRTH (Mo., Day, Year) Feb. 5, 1938	
6. CITY, TOWN OR LOCATION OF DEATH Atlanta		7. HOSPITAL OR OTHER INSTITUTION NAME (If not in column 6, give street and No.) Georgia Baptist Hospital	
8. STATE OF DEATH (If not in column 6, give street and No.) Georgia		9. MARRIAGE STATUS (If not in column 6, give street and No.) Married	
10. SOCIAL SECURITY NUMBER 418-38-2359		11. USUAL OCCUPATION (Give line of work, nature of business, or profession) Own Home	
12. CITY, TOWN OR LOCATION OF DEATH Fulton		13. STREET AND NUMBER 40 Bonnie Lane	
14. CITY, TOWN OR LOCATION OF DEATH Fulton		15. INSIDE CITY LIMITS (Yes or No) No	
16. DECEASED'S NAME William N. Attaway		17. MOTHER'S MAIDEN NAME Mildred	
18. DECEASED'S NAME Bill C. Hudson		19. MOTHER'S MAIDEN NAME 30328	
20. DATE OF BURIAL Sept. 27, 1986		21. LOCATION (City or Town, State, Zip, County) Atlanta, Fulton, Georgia	
22. FUNERAL HOME John A. Pippin		23. NAME AND ADDRESS OF FACILITY (Street, R.F.D., No., City or Town, State, Zip) Sandy Springs Chapel P.O. Box 28523 Atlanta, Georgia 30358	
24. EMBALMER LICENSE NO. 421		25. IMMEDIATE CAUSE Carcinoma of the colon with metastases	
26. NO EMBALMING DONE		27. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH months	
28. DATE OF OPERATION (Mo., Day, Year) No		29. CONDITIONS FOR WHICH OPERATION WAS PERFORMED (Specify) No	
30. DATE OF INJURY (Mo., Day, Year) October 17, 1986		31. DESCRIBE HOW INJURY OCCURRED None	
32. PLACE OF INJURY (Home, Farm, Street, Factory, Office, etc.) None		33. LOCATION (Street, R.F.D., No., City or Town, State, Zip, County) None	
34. DATE OF DEATH (Mo., Day, Year) October 17, 1986		35. HOUR OF DEATH 6:13 A.M.	
36. NAME OF ATTENDING PHYSICIAN (If other than certifier) None		37. DATE PRONOUNCED DEAD (Mo., Day, Year) None	
38. NAME AND TITLE OF CERTIFIER (Physician, Medical Examiner, or Coroner) N. Harrison Reeves, M.D.		39. ADDRESS OF CERTIFIER (Street, R.F.D., No., City or Town, State, Zip) 478 Peachtree St. N. E., Atlanta, Ga. 30308	
40. SIGNATURE OF CERTIFIER <i>N. Harrison Reeves</i>		41. SIGNATURE OF REGISTRAR <i>W. S. ...</i>	

"Certificate of Record"
This is an exact copy of the death certificate received for filing in Fulton County, Georgia.

Local Custodian
County of Fulton, Atlanta, Ga.

Signed by:
Date:

[Signature]
OCT 27 1986
FULTON COUNTY, GA.

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AFFIDAVIT OF CONTINUOUS MARRIAGE

STATE OF FLORIDA
COUNTY OF WAKULLA

BEFORE ME this day personally appeared ROBERT YARBOROUGH,
who being first duly sworn, deposes and says that:

1. Affiant personally knew NANCY E. HUDSON (Deceased) and BILLY C. HUDSON, her husband.
2. NANCY E. HUDSON and BILLY C. HUDSON were married in Columbus, MI, on 4-7-50.
3. NANCY E. HUDSON died on September 26, 1986.
4. NANCY E. HUDSON and BILLY C. HUDSON were continuously married until the death of NANCY E. HUDSON, and were never legally separated or divorced.
5. The Affiant is not related to NANCY E. HUDSON or BILLY C. HUDSON, and has no financial interest in the sale of their real or personal property.

FURTHER AFFIANT SAYETH NAUGHT.

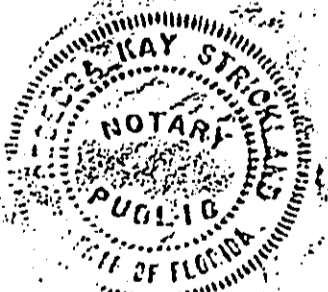
Robert N. Yarborough
ROBERT YARBOROUGH
Panacea, FL 32346

SWORN TO AND SUBSCRIBED before me this 23rd day of January, 1989.

Rebecca Kay Strickland
NOTARY PUBLIC

My Commission Expires:

Notary Public, State of Florida
My Commission Expires Aug. 21, 1991
Bonded Thru Troy Fain - Insurance Inc.



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