

Return to:
Name James A. Taylor
Address P. O. Box 123
Panacea, Fla. 32346

This instrument was prepared by:
Name A. L. PORTER
Address P. O. Box 176
No. 1, Ochlocknee St.
CRAWFORDVILLE, FLORIDA 32327

94874
RECORDED
AT THE CLERK'S OFFICE

91 SEP 23 PM 1:33

J. HAROLD THURMOND
CLERK CIRCUIT COURT
WAKULLA COUNTY FLORIDA

Grantee S.S. No. _____
Name _____

Property Appraiser's
Parcel Identification No. _____

Grantee S.S. No. _____
Name _____

WARRANTY DEED (STATUTORY FORM — SECTION 689.02, F.S.)

This Indenture, made this 18th day of September 1991, Between

MAX CLAIRE SIMPSON, SR.

whose post office address is 2502 Tupelo Terrace, Tallahassee, Florida 32303
of the County of Leon, State of Florida, grantor, and

JAMES A. TAYLOR

whose post office address is P. O. Box 123, Panacea, Florida 32346
of the County of Wakulla, State of Florida, grantee,

Witnesseth that said grantor, for and in consideration of the sum of Ten ----- 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:

Lot 86 in Block 9 of Panacea Park, a subdivision in
Section 23, Township 5 South, Range 2 West, as shown by
map or plat thereof of record on page 191 of Deed
Book 14 of the public records of Wakulla County,
Florida.

TRANS NUM:00094874
DOC STAMPS PD: \$6.00
INTANG. TAX PD: \$2.00
J. HAROLD THURMOND WAKULLA CO.
BY: Mari D. May D.C.

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:

Muriel Simpson
Printed or typed name: Muriel Simpson

Max Claire Simpson, Sr.
Printed or typed name: Max Claire Simpson, Sr.

Cheryll E. Olah
Printed or typed name: Cheryll E. Olah

Printed or typed name: _____ (Seal)

NOTARY PUBLIC
STATE OF FLORIDA
COUNTY OF WAKULLA

I, Cheryll E. Olah, that on this day before me, an officer duly qualified to take acknowledgments, personally appeared
Max Claire Simpson, Sr.

to be the person(s) described in and who executed the foregoing instrument and acknowledged before me that
he/she/they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 18th day of September, 1991.

My commission expires:

Notary Public, State of Florida
My Commission Expires Feb. 14, 1994

22(F-761-001 (rev. 12/90))

OFF. REC. 182 PAGE 711

Cheryll E. Olah

Notary Public Cheryll E. Olah

Printed, typed or stamped name: