

110227

RECORDED
AT TIME & DATE NOTED

SEP 21 AM 11:21

QUITCLAIM DEED

CLERK OF THE CIRCUIT COURT
WAKULLA COUNTY FLORIDA

THIS INDENTURE is made this 21st day of July,

1993, by and between **FRANCES IRENE BRAMBLETT, JAMES F. BENNETT,**
and **CATHERINE LYNN BENNETT BEAUMONT**, Residuary Beneficiaries of
the Estate of Frances Howard Bennett, deceased, the will of said
decedent having been admitted to record by the Circuit Court for
Wakulla County, Florida, Probate Division, on May 3, 1993, said
decedent being the unremarried widow of James Ralph Bennett,
whose death certificate is attached hereto as Exhibit A, each of
said Residuary Beneficiaries conveying property which is not his
or her homestead, as parties of the first part, and **WILLIAM H.
BENNETT**, whose address is 4000 Paula Joyce Drive, Ooltewah,
Tennessee 37363, and whose social security number is
[REDACTED] of the County of Hamilton, State of
Tennessee, party of the second part.

W I T N E S S E T H:

That the said parties of the first part, for and in
consideration of the sum of Ten Dollars (\$10.00) in hand paid by
the said party of the second part, the receipt whereof is hereby
acknowledged, have remised, released and quitclaimed, and by
these presents do remise, release and quitclaim unto the party of
the second part, and his heirs, successors and assigns forever,
the following described land, situate, lying and being in the
County of Wakulla, State of Florida, to wit:

Lot 22, Block 19, Wakulla Gardens, as shown
by plat of said subdivision of record on page
39 of Plat Book No. One of the public records
of Wakulla County, Florida.

TO HAVE AND TO HOLD the same together with all and
singular the appurtenances thereunto belonging or in anywise
appertaining, and all the estate, right, title, interest, lien,
equity and claim whatsoever of the said parties of the first
part, either in law or equity, to the only proper use, benefit
and behoof of the said party of the second part, his heirs,
successors and assigns forever.

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IN WITNESS WHEREOF, the said parties of the first part have hereunto set their hands and seals the day and year first above written.

Signed, sealed and delivered in the presence of:

Greg Gensler
GREG GENSER
Melba Huggins
Melba Huggins

As to Frances Irene Bramblett

Frances Irene Bramblett
(Frances Irene Bramblett)
1500 Pineland Drive
Bainbridge, Georgia 31717

Wanda A. Miller 7/21/93
MY COMMISSION EXPIRES JUNE 13, 1994

Signed, sealed and delivered in the presence of:

Mary R. Little
Mary R. Little
Patricia E. Lawrence
Patricia E. Lawrence

As to James F. Bennett

James F. Bennett
(James F. Bennett)
10130 Crestmont Drive
Ooltewah, Tennessee 37363

Signed, sealed and delivered in the presence of:

Jeanette Walker
JEANETTE WALKER
JANICE WESTMERLAND
JANICE WESTMERLAND

As to Catherine Lynn Bennett Beaumont

Catherine Lynn Bennett Beaumont
(Catherine Lynn Bennett Beaumont)
9421 Bennie Lane
Ooltewah, Tennessee 37363

TRANS NUM:00110227
DOC STAMPS PD: \$.70
INTANG. TAX PD: \$.00
J. HOWARD THURMOND WAKULLA CO.
BY: [Signature] D.C.

STATE OF GEORGIA)
)
COUNTY OF DECATUR)

Before me personally appeared Frances Irene Bramblett, to me well known and known to me to be the individual described in and who executed the foregoing instrument, and acknowledged to and before me that she executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State aforesaid this 21st day of July, 1993

Wanda A. Miller
Notary Public

My commission expires: _____

STATE OF TENNESSEE)
)
COUNTY OF HAMILTON)

Before me personally appeared James F. Bennett, to me well known and known to me to be the individual described in and who executed the foregoing instrument, and acknowledged to and before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State aforesaid this 4th day of August, 1993

Charlotte M. Shillett
Notary Public

My commission expires: 5-15-95

STATE OF TENNESSEE)
)
COUNTY OF HAMILTON)

Before me personally appeared Catherine Lynn Bennett Beaumont, to me well known and known to me to be the individual described in and who executed the foregoing instrument, and acknowledged to and before me that she executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State aforesaid this 2nd day of August, 1993

Catherine Lynn Bennett
Notary Public

My commission expires: _____

THIS INSTRUMENT PREPARED BY:

Terry Atkin Cavett
Gearhiser, Peters & Horton
320 McCallie Avenue
Chattanooga, Tennessee 37402

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STATE OF TENNESSEE
CORDELL HULL BUILDING
DEPARTMENT OF HEALTH
NASHVILLE, TENNESSEE 37237

I hereby certify the below to be a true and correct copy of the original document on file in this department. Valid ONLY when embossed seal of the Tennessee Department of Health and red imprinted signature of the State Registrar are affixed.

Paula Taylor
Paula Taylor
State Registrar

8377
32
3300

CERTIFICATE OF DEATH
TENNESSEE DEPARTMENT OF PUBLIC HEALTH
DIVISION OF VITAL STATISTICS

70-037360

| | | | | | | | |
|--|---|--|-----------|--|--|----------------------------------|--|
| BIRTH NO. | | FILE NO. | | LAST | | DATE OF DEATH (MONTH, DAY, YEAR) | |
| DECEASED - NAME JAMES RALPH BENNETT | | | | | | 2. NOVEMBER 24, 1970 | |
| 1. RACE WHITE | 3. SEX MALE | 4a. AGE - LAST BIRTHDAY (YEARS) | 4b. MONTH | 4c. DAY | 6. DATE OF BIRTH (MONTH, DAY, YEAR) | | |
| | | 71 | | | 6. JUNE 30, 1899 | | |
| 8. COUNTY OF DEATH HAMILTON | | 7b. CITY, TOWN, OR LOCATION OF DEATH CHATTANOOGA | | 7c. YES | 7d. HOSPITAL OR OTHER INSTITUTION - NAME MEMORIAL | | |
| 9. RACE OF BIRTH (IF NOT IN U.S.A.) GEORGIA | 10. CITIZEN OF WHAT COUNTRY U.S.A. | 11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) MARRIED | | 12. SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME) FRANCES HOWARD BENNETT | | | |
| 13a. SOCIAL SECURITY NUMBER | 13b. SERVICE IN ARMED FORCES (SPECIFY WAR OR DATE OF SERVICE) NO | 13c. USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED) RETIRED PAPER | | 13d. KIND OF BUSINESS OR INDUSTRY FARMING | | | |
| 14a. RESIDENCE - STATE TENNESSEE | 14b. COUNTY HAMILTON | 14c. CITY, TOWN, OR LOCATION COLLETAH | | 14d. YES | 14e. STREET AND NUMBER ROUTE #3, BRANIE LANE | | |
| 15. FATHER - NAME WILLIAM H. BENNETT | | 16. MOTHER - MAIDEN NAME IDA L. ORGAN | | 17. INFORMANT - NAME JENIE CHATTANOOGA, TENN. | | 18. MAILING ADDRESS | |

EXHIBIT A

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|---|--|--|--|---|--|
| 19. PHYSICIAN - CERTIFICATION I ATTENDED THE DECEASED AND DEATH OCCURRED AT THE PLACE, ON THE DATE, AND TO THE DEPT. OF KNOWLEDGE, DUE TO THE CAUSES STATED. | | SIGNATURE | | DATE SIGNED (MONTH, DAY, YEAR) | |
| 20. MEDICAL EXAMINER - CERTIFICATION ON THE BASIS OF THE EXAMINATION OF THE BODY AND OF THE INVESTIGATION, IN MY OPINION, DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSES STATED. | | SIGNATURE <i>F. E. Marsh</i> | | DATE SIGNED (MONTH, DAY, YEAR) 12/2/1970 | |
| 21. PHYSICIAN - NAME (TYPE OR PRINT) F. E. Marsh, M.D. | | 22. MAILING ADDRESS (STREET OR R.F.D. NO.) | | 23. CITY OR TOWN STATE | |
| 24. AL CREMATION, REMOVAL BURIAL | | 25. DATE (MONTH, DAY, YEAR) 11-26-1970 | | 26. CEMETERY OR CREMATORY - NAME LOCATION COLLETAH, TENNESSEE | |
| 27. FUNERAL HOME - NAME AND ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP) | | 28. REGISTRATION - SIGNATURE <i>William P. Butler</i> | | 29. DATE REGISTERED BY LOCAL HEALTH OFFICIAL 12-14-70 | |