

Address:

This Instrument Prepared by: Isaac Heath Mathis
Address: 131 Elizabeth St. Crawfordville FL 32327

Inst: 0000225312 Date: 05/27/2005 Time: 10:32
Doc Stamp-Deed: 0.70
DC, Brent Thurmond, WAKULLA County B:595 P:645

Property Appraisers Parcel Identification (Folio Number(s)):
00-00-043-010-09287-000

CSaminola Paper & Printing Co., Inc., 1987

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Quit Claim Deed, Executed the day of 5-27, 2005, by

first party, to TRACY DEAN MATHIS 12 ARINTEA DR CRAWFORDVILLE FLA 32327
whose post office address is

second party, Isaac Heath Mathis 131 Elizabeth St Crawfordville FL 32327

(Wherever used herein the terms "first party" and "second party" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth, That the first party, for and in consideration of the sum of \$ _____, in hand paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release, and quit-claim unto the second party forever, all the right, title, interest, claim and demand which the said first party has in and to the following described lot, piece or parcel of land, situate, lying and being in the County of _____, State of _____, to-wit:

Lots 3, 4, 5 in block 35 wakulla garden's unit III
as plat book 1 page 43

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 first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.

In Witness Whereof, the said first party has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in the presence of:

Wanda Sweett
Witness Signature (as to first Grantor)

Wanda Sweett
Printed Name

Erika Harrell
Witness Signature (as to first Grantor)

Erika Harrell
Printed Name

Witness Signature (as to Co-Grantor, if any)

Printed Name

Witness Signature (as to Co-Grantor, if any)

Printed Name

Tracy Dean Mathis
Grantor Signature

TRACY DEAN MATHIS
Printed Name

12 ARINTEA DRIVE CRAWFORDVILLE FLA 32327
Post Office Address

Co-Grantor Signature (if any)

Printed Name

Post Office Address

STATE OF Florida

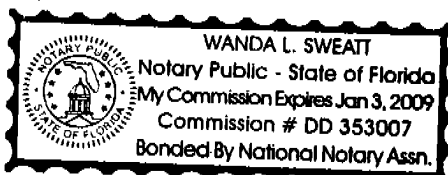
COUNTY OF Wakulla

Tracy Dean Mathis

known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that executed the same, and an oath was not taken. (Check one:) ☐ Said person(s) is/are personally known to me. ☐ Said person(s) provided the following type of identification: FL DR LIC CDL Exp 8-11-09

I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared

NOTARY RUBBER STAMP SEAL



Witness my hand and official seal in the County and State last aforesaid this

27th day of May, A.D. 2005

Wanda L. Sweett
Notary Signature

Wanda L. Sweett
Printed Notary Signature