

This instrument was prepared by:
Name W.H. WEBSTER, Attorney
Address P.O. Box 478
Crawfordville, Florida

Warranty Deed

(STATUTORY FORM—SECTION 689.02 F.S.)

This Indenture, Made this 14th day of January 1981, Between
BERTHA LEE GREEN, widow and sole heir of RICHARD GREEN, deceased,
of the County of Taylor, State of Florida, grantor*, and
EDDIE FRANKLIN and FAYE FRANKLIN, his wife,
whose post office address is Rt. 1, Box 100, Sopchoppy, Florida 32358
of the County of Wakulla, State of Florida, grantee*,

Witnesseth, That said grantor, for and in consideration of the sum of Ten and 00/100 (\$10.00) ----- 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:

Legal Description attached as Exhibit "A".

See also the Death Certificate and Affidavit attached as
Exhibits "B" and "C".



RECORDED
AT TIME & DATE NOTED
1981 JAN 16 AM 10:46
CARLTON TUCKER
CLERK CIRCUIT COURT
WAKULLA COUNTY FLORIDA
46041

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:

Ava Jean Dorman
Dora Miller
Robert Miller
Caretha Crum

Bertha Lee Green (Seal)
BERTHA LEE GREEN (Seal)
(Seal)
(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

BERTHA LEE GREEN

to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that
S he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 14th day of January
19 81

My commission expires:

79 676

By Dora Miller
Deputy Clerk

CHARLES RALPH CARLTON
CLERK OF CIRCUIT COURT
TAYLOR COUNTY, FLORIDA

Notary Public

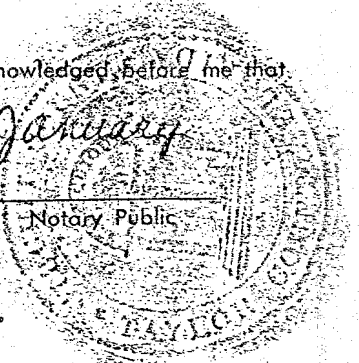


EXHIBIT "A"

Commence at a concrete monument marking the Southeast corner of Section 6, Township 5 South, Range 2 West, Wakulla County, Florida and thence run North $89^{\circ}54'56''$ West along the South boundary of said Section 6 a distance of 1,273.80 feet to a concrete monument for the POINT OF BEGINNING. From said POINT OF BEGINNING continue North $89^{\circ}54'56''$ West along said South boundary 398.64 feet to a concrete monument, thence run North $00^{\circ}14'34''$ East 1,648.28 feet to a concrete monument, thence run South $89^{\circ}54'55''$ East 398.64 feet to a concrete monument, thence run South $00^{\circ}14'34''$ West 1,648.28 feet to the POINT OF BEGINNING, and containing 15.08 acres, more or less.

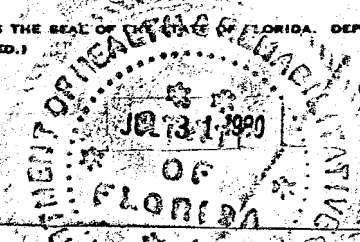
Also described as:

Commence at the Southeast corner of Section 6, Township 5 South, Range 2 West, and run West along the Southern boundary line of said Section 6 the distance of 19.30 chains to the POINT OF BEGINNING. From said POINT OF BEGINNING, run thence North 25 chains, run thence West 6.04 chains, thence run South 25 chains, and thence run East along the Southern boundary line of said Section 6 a distance of 6.04 chains to the POINT OF BEGINNING, and containing 15.1 acres, more or less, being situate in the Southeast Quarter of Section 6, Township 5 South, Range 2 West.

EXHIBIT "B"
CERTIFIED COPY

I HEREBY CERTIFY THE COPY REPRODUCED BELOW TO BE A TRUE AND CORRECT COPY OF THE ORIGINAL RECORD ON FILE IN THE BUREAU OF VITAL STATISTICS OF THE STATE OF FLORIDA, DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES, AT JACKSONVILLE, FLORIDA.

(NOT VALID UNLESS THE SEAL OF THE STATE OF FLORIDA, DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES, IS AFFIXED.)



Everett H. Williams
STATE REGISTRAR FOR VITAL STATISTICS
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES DIVISION OF HEALTH BUREAU OF VITAL STATISTICS				FLORIDA		STATE FILE NO. 75-039082	
DECEASED—NAME 1. Richard Green				SEX 2. Male	DATE OF DEATH (MONTH, DAY, YEAR) 3. May 21, 1975		
RACE (SPECIFY) 4. Negro	AGE—LAST BIRTHDAY (YEARS) 5. 70	UNDER 1 YEAR 6. 70	UNDER 1 DAY 7. 70	DATE OF BIRTH (MONTH, DAY, YEAR) 8. Aug. 25 1904	COUNTY OF BIRTH 9. Taylor		
CITY, TOWN, OR LOCATION OF DEATH 10. Perry				HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) 11. Doctors Memorial Hospital			
STATE OF BIRTH (NOT IN U.S.A., NAME COUNTRY) 12. Florida				CITIZEN OF WHAT COUNTRY 13. U.S.A.			
SOCIAL SECURITY NUMBER 14. 705-01-5172				MARITAL STATUS (SPECIFY) 15. Married			
USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED) 16. Laborer				SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME) 17. Bertha Lee			
RESIDENCE—STATE 18. Florida				KIND OF BUSINESS OR INDUSTRY 19. Construction			
CITY, TOWN, OR LOCATION 20. Taylor				INSIDE CITY LIMITS (SPECIFY YES OR NO) 21. Yes			
FATHER—NAME 22. Archie Green				MOTHER—MAIDEN NAME 23. Florence Roman			
INFORMANT—NAME 24. Bertha Green				MAILING ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP) 25. 411 E. Spring Pl., Perry, Fla. 32347			
PART I. DEATH WAS CAUSED BY: 1. IMMEDIATE CAUSE (a) Bronchitis pneumonia 2. DUE TO, OR AS A CONSEQUENCE OF: (b) Serum sickness (c) Serum sickness APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH 3. 5/21/75							
PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a) 4. None AUTOPSY (YES/NO) 5. No IF YES WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH? 6. No							
PHYSICIAN: ACCIDENT, SUICIDE OR POISONING, OR UNDETERMINED (SPECIFY) 7. None		DATE OF INJURY (MONTH, DAY, YEAR) 8. 5/21/75		HOUR 9. 10:00		HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 10) 10. None	
INJURY AT WORK (SPECIFY YES OR NO) 11. No		PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY) 12. None		LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, STATE) 13. None			
CERTIFICATION—PHYSICIAN: 14. W. J. B. M. M. D.		MONTH DAY YEAR 15. 5/21/75		AND LAST SAW HIM/HER ALIVE ON 16. 5/21/75		DEATH OCCURRED AT THE PLACE, ON THE DATE, AND, TO THE BEST OF MY KNOWLEDGE, DUE TO THE CAUSE(S) STATED. 17. 10:00	
CERTIFICATION—MEDICAL EXAMINER OR CORONER: ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR THE INVESTIGATION, IN MY OPINION, THE DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSE(S) STATED. 18. None		HOUR OF DEATH 19. 10:00		THE DECEDENT WAS PROHIBITED DEAD 20. None			
CERTIFIER—NAME (TYPE OR PRINT) 21. W. J. B. M. M. D.		SIGNATURE 22. W. J. B. M. M. D.		DEGREE OR TITLE 23. MD		DATE SIGNED (MONTH, DAY, YEAR) 24. 5/26/75	
MAILING ADDRESS—CERTIFIER 25. Box 283		CITY OR TOWN 26. Perry		STATE 27. Fla.			
BURIAL, CREMATION, REMOVAL (SPECIFY) 28. Burial		CEMETERY OR CREMATORY—NAME 29. Springhill Cemetery		LOCATION 30. Perry, Florida			
DATE (MONTH, DAY, YEAR) 31. June 1, 1975		FUNERAL HOME—NAME AND ADDRESS 32. Willman Funeral Home, Perry, Fla.		STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP 33. None			
FUNERAL DIRECTOR—SIGNATURE 34. Willman		REGISTERAR—SIGNATURE 35. Everett H. Williams		DATE RECEIVED BY LOCAL REGISTRAR 36. May 28, 1975			

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AFFIDAVIT

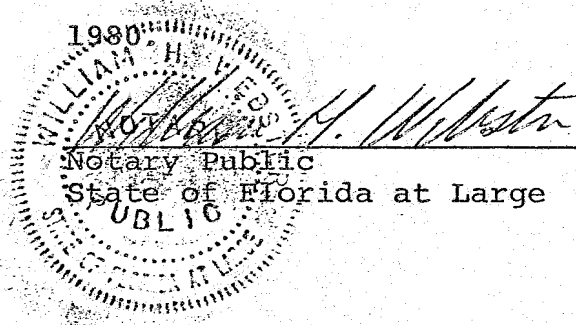
STATE OF FLORIDA
COUNTY OF WAKULLA

Before me this day personally appeared C. K. GREEN, who
being first duly sworn, deposes and says:

1. That RICHARD GREEN, deceased, was the Affiant's
uncle.
2. That the Affiant has known RICHARD GREEN all of the
Affiant's life (d. o. b. March 17, 1912).
3. That to the Affiant's knowledge, RICHARD GREEN and
BERTHA LEE GREEN were married on May 18, 1940, and they resided
together as husband and wife continuously until Richard Green's
death on May 21, 1975.
4. That to the Affiant's knowledge, RICHARD GREEN and
BERTHA LEE GREEN were never divorced or separated.
5. That to the Affiant's knowledge, RICHARD GREEN and
BERTHA LEE GREEN never had any children and that at the time of
Richard Green's death, Bertha Lee Green was his sole heir.
6. FURTHER, the Affiant sayeth not.

C K Green
C. K. GREEN

Sworn to and subscribed before me this 13th day of August,



My Commission Expires:
Notary Public, State of Florida at Large
My Commission Expires March 4, 1984
Bonded By Utica Mutual Insurance Company.

This instrument prepared by:

William H. Webster
Attorney at Law
Post Office Box 478
Crawfordville, Florida
32327

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EXHIBIT "C"