

Prepared By: JAMES A. PFOST
510 BEARD ST
TALLAHASSEE, FL 32303

QUIT CLAIM DEED

Property Appraiser's Parcel Identification No. 113050 B0070

This Quit Claim Deed, Executed this 30th day of September, 2008.

By (first party) BARBARA M. LINTHICUM

To (second party) JAMES A. PFOST AND BARBARA M. LINTHICUM

Whose post office address is 510 BEARD ST. TALLAHASSEE FL 32303
(wherever used herein the terms "first party" and "second party" shall include singular and plural, heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth, That the said first party, for and in consideration of the sum of \$ 10⁰⁰, in hand paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quit-claim unto the said 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 land, situate, lying and being in the County of LEON, State of FLORIDA To Wit:

510 BEARD STREET, HIGHLAND PARK, LOTS 7+8
BLOCK B OR 1420/1843

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 for 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 :

Wendi Be
Witness Signature as to First Party

Wendi Brown
Printed Name

[Signature]
Witness Signature as to First Party

Malcolm Chellman
Printed Name

[Signature]
Witness Signature as to ~~Co~~ First Party (if any)

David B Flagg
Printed Name

[Signature]
Witness Signature as to Co-First Party (if any)

[Signature]
Printed Name

[Signature]
Signature of First Party

BARBARA M. LINTHICUM
Printed Name

510 BEARD STREET
Post Office Address

TALLAHASSEE, FL 32303

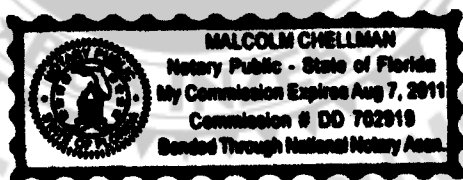
Signature of Co-First Party (if any)

Printed Name

Post Office Address

STATE OF FLORIDA-COUNTY OF LEON

The foregoing instrument was acknowledged before me this 30th day of September, 2008, by Barbara M. Linthicum who is personally known to me or has produced _____ as identification and who did/did not take an oath.



Bob Inzer, Clerk Circuit Court

[Signature]

Signature of Notary/Deputy Clerk

Malcolm Chellman
Printed Name