Quitclaim Deed



2005034678 2 PGS

THIS QUITCLAIM DEED, executed this 30 day of March , 20 05,
bultiret portu (-roptor 2017/1/1/1/5) - 1 1/1/4/01 2/1/5/4/1/1/3
whose post office address is 1727 walder FOND Dr. FIPIERCE, FLorida 349 45
to second party, Grantee, Mary ANN CONTINO
whose post office address is P.O. Box BO PiErce field, NY12973
whose post office address is 110. 42)
WITNESSETH, That the said first party, for good consideration and for the sum of
paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of
CITRUS SPRINGS UNITO200 BLOCK 1341 LOT#005
1D#18E 175 100200 13410 0050 Descr IN, BK 420 Pg 572 - VACANT LAND

OFFICIAL RECORDS
CITRUS COUNTY
BETTY STRIFLER
CLERK OF THE CIRCUIT COURT
RECORDING FEE \$18 50
DOCUMENTARY TAX \$0 70
2005034678 BK:1845 PG:1677
04/25/2005 12:10 PM 2 PGS
VCANCEL, DC Receipt #020604



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 presence of
Signature of Witness.
Print name of Witness. NAPIRA MOHIMMED
Signature of Witness: Witalia Kulunche
Print name of Witness: Notalie Kilbourne
Signature of First Party: <u>Antoinette</u> M. Luschillo
Print name of First Party: ANTOINETTE FUSCHILLO FLDL/F240-018-22-679 EXPIRES 5-16-C
Signature of Second Party: Marylesia Contino
Print name of Second Party: MARY ANN CONTINO NYSL 1716185621 EXDITES 11-16-10
Signature of Preparer <u>Proceeded</u> Exterio
Print Name of Preparer Mary ANI CONTINO
Address of Preparer P.O. Box 180 Pierce Field, NY 12973
State of Florida, County of Indian River }
on 3.30-05 before me, Notolie Kilbourne appeared Antoine Fuschilo and Maryann Contino personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are
subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.
Signature of Notary Afficiate Management of
Affiant Known Produced ID Type of ID DRIVEYS LICENCE (Seal)
(Seal) NATALE KLBOURNE NATALE KLBOURNE

Commission & DD 328680

Bonded By National