

Return to: (enclose self-addressed stamped envelope)

Name: Gene A Coats
 Address: 12296 S Turner Ave
Floral City, FL 34436
 This Instrument Prepared by:
 Name: " " " "
 Address: Same as above
 Property Appraisers Parcel Identification #1854491
 Folio Number(s):
 Grantee[s] S.S. # (s)



2006032665 1 PG

OFFICIAL RECORDS
 CITRUS COUNTY
 BETTY STRIFLER
 CLERK OF THE CIRCUIT COURT
 RECORDING FEE: \$10.00
 # 2006032665 BK: 2003 PG: 885
 05/05/2006 09:28 AM 1 PG
 LMITCHELL, DC Receipt #019662

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Quit Claim Deed, Executed the 1st day of May, 2006, by
Shirley Blouin (a married woman)
 first party, to Gene A. Coats & Cathy J. Foley (Both single People)
 whose post office address is 12296 S Turner Ave Floral City FL 34436
 second party.

(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 \$ Value Received,
 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
Citrus, State of Florida, to-wit:

Property located at 8435 Great Oaks Blvd -
Floral City, FL 34436

Property Key # 1854491 Book # 694 Page 169
 PCLB. 155.29 FT of S 388.23 FT OF E 561 FT OF GL4

- (1) 1 MOBILE HOME, Red & white in color. 12x50 w/ screened porch.
 AGE UNKNOWN.
 (2) WOODEN GARAGE (3) 1.7 ACRES MAL. WHERE IS AS IS.
 NO SPECIFIED QUANTITIES.

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:

Carol A. Pimentel
 Witness Signature (as to first Grantor)
CAROL A. PIMENTEL
 Printed Name
Louette P. Lemos
 Witness Signature (as to first Grantor)
Louette P. Lemos
 Printed Name

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

Printed Name

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

Printed Name

STATE OF MASSACHUSETTSCOUNTY OF BRISTOLSHIRLEY BLOUIN

known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that SHE
 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: MASSACHUSETTS LICENSE #01628523

NOTARY RUBBER STAMP SEAL

MATTHEW J. O'CONNOR
 Notary Public
 Commonwealth of Massachusetts
 My Commission Expires
 March 28, 2008

Grantor Signature

Printed Name

Post Office Address

Co-Grantor Signature, (if any)

Printed Name

Post Office Address

Witness my hand and official seal in the County and State last aforesaid
 this 1st day of MAY, 2006
 Date

Notary Signature

Printed Name