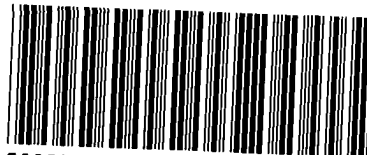


Return to: (enclose self-addressed stamped envelope)

Name: Sharla A. Weaver
 Address: PO Box 4196
Homosassa Spgs, FL 34447
 This Instrument Prepared by:
 Name: Sharla A. Weaver
 Address: PO Box 4196
Homosassa Spgs, FL 34447
 Property Appraisers Parcel Identification
 Folio Number(s):
 Grantee(s) S.S. # (s)



2009027338 1 PG

OFFICIAL RECORDS
 CITRUS COUNTY
 BETTY STRIFLER
 CLERK OF THE CIRCUIT COURT
 RECORDING FEE: \$10.00
 DOCUMENTARY TAX: \$0.70
 # 2009027338 BK: 2294 PG: 1341
 06/23/2009 09:34 AM 1 PG
 ATYRE, DC Receipt #021189

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Quit Claim Deed, Executed the 18 day of January 2007, by
Jonathan A. Schuler,
 first party, to Sharla A. Weaver,
 whose post office address is 4196 Homosassa Spgs. 34447,
 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 \$ 100.00,
 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:

GULF Hwy land unit 2 PB 4 PG 36 N 260.26 Ft OF lot 2 UNR2C
OF lot 2 BIK H less E 167.48 Ft Thereof Further Desc
IN OR BK 789 PG-1141

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:

Judy Rogers
 Witness Signature (as to first Grantor)

Judy Rogers
 Printed Name

Gerardine Edwards
 Witness Signature (as to first Grantor)

Gerardine Edwards
 Printed Name

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

Printed Name

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

Printed Name

STATE OF _____)
 COUNTY OF _____)

Jonathan A. Schuler
 Grantor Signature **LS**

Jonathan A. Schuler
 Printed Name

PO Box 4196 Homosassa FL 34447
 Post Office Address

Co-Grantor Signature, (if any) **LS**

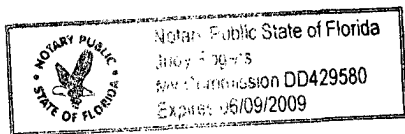
Printed Name

Post Office Address

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

known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that Jonathan Schuler
 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: _____

NOTARY RUBBER STAMP SEAL



Witness my hand and official seal in the County and State last aforesaid
 this 19 day of JANUARY 2007
 Date

Judy Rogers
 Notary Signature
Judy Rogers
 Printed Name