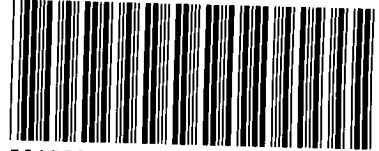


This Document Prepared By:

**Cindy Brotnitsky for
Southern Security Title Services, Inc.
2676 W. Woodview Lane, Lecanto, FL 34461
This instrument was prepared incidental to the
writing of a title insurance policy.**

Parcel ID Number: 21 19S 20E 0020 02370 0010

RETURN TO GRANTEE



2010009351 2 PGS

OFFICIAL RECORDS
CITRUS COUNTY
BETTY STRIFLER
CLERK OF THE CIRCUIT COURT
RECORDING FEE: \$18.50
DOCUMENTARY TAX: \$630.00
2010009351 BK:2341 PG:478
03/03/2010 09:25 AM 2 PGS
KCCR,DC Receipt #007321

Warranty Deed

This Indenture, Made this **24th** day of **February, 2010** A.D., **Between
Jeremy E. Nash and Laura A. Nash, husband and wife, grantors,**
and

**Cheryl L. Doty, a single woman and Justin Hallford, a single man, as Joint Tenants With Full
Rights of Survivorship, Not as Tenants in Common**

whose address is: 715 Pineaire St. Inverness, FL 34452,
grantees.

Witnesseth that the GRANTORS, for and in consideration of the sum of
-----**TEN DOLLARS (\$10)**----- DOLLARS,
and other good and valuable consideration to GRANTORS in hand paid by GRANTEES, the receipt whereof is hereby acknowledged,
have granted, bargained and sold to the said GRANTEES and GRANTEES' heirs, successors and assigns forever, the following
described land, situate, lying and being in the County of **Citrus** State of **Florida** to wit:

**Lots 1 and 2, Block 237, INVERNESS HIGHLANDS SOUTH, according to the map or plat
thereof, as recorded in Plat Book 3, Pages 51 through 66, inclusive, of the Public Records of
Citrus County, Florida.**

Subject to current taxes, easements and restrictions of record.

and the grantors do hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

In Witness Whereof, the grantors have hereunto set their hands and seals the day and year first above written.

Signed, sealed and delivered in our presence:

Printed Name: Cindy Brotnitsky
Witness

Jeremy E. Nash (Seal)
P.O. Address: 193 N. Bliss Pt., Inverness, FL 34453

Printed Name: Amanda Kewthorn
Witness

Laura A. Nash (Seal)
P.O. Address: 193 N. Bliss Pt., Inverness, FL 34453

**STATE OF Florida
COUNTY OF Citrus**

The foregoing instrument was acknowledged before me this **24th** day of **February, 2010** by

Jeremy E. Nash and Laura A. Nash, husband and wife

who are personally known to me or who have produced their Fl. D.L. as identification.



Cindy Brotnitsky
Commission # DD537362
Expires April 5, 2010
Benevolent Troy Fain - Insurance, Inc. 800-385-7019

Printed Name: Cindy Brotnitsky
Notary Public
My Commission Expires: / /

Septic System Re-Sale Inspection
 Authority: Chapter 42 – Citrus County Code

| | |
|---------------------|---------------------------|
| Date: | 2/19/10 |
| Buyer: | Doty & Halford |
| Seller: | Nash |
| Physical Address: | 715 E. Pinehills St. Inv. |
| Phone Number: | |
| Pumping Contractor: | Simply |

Septic Tank

| | |
|------------------------------------|---|
| Approximate Tank Volume: | 900 Gallons |
| Material: | <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Other |
| Pumping Performed | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Baffle and Tees Intact and Secure | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Outlet Filter | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Tank is Free of Structural Defects | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Lid and Manholes Properly Fitted | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

Dosing Tank

N/A

| | |
|--|--|
| Approximate Tank Volume: | Gallons |
| Material: | <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Other |
| Pump is Functional and Performing | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Pump is Elevated | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Check Valve | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Working Alarm | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Electrical Connections Secure | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Tank Protected From Surface Water Infiltration | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |

Drainfield

| | |
|--|--|
| Drainfield Type | <input checked="" type="checkbox"/> Rock <input type="checkbox"/> Alt. Product <input type="checkbox"/> Other |
| Configuration | <input checked="" type="checkbox"/> Trench <input type="checkbox"/> Bed <input type="checkbox"/> Mound <input type="checkbox"/> Subsurface |
| Approximate Size | 3000 Square Feet |
| Visible Signs of Seepage | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Visible Signs of Previous Failure | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Ponding of Sewage | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Downspouts Directed Towards Drainfield | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

System Appears Functional (Signature) *A. J. [Signature]*

This inspection is designed to assess the condition of a system at a particular moment in time. This inspection will identify obvious substandard systems, for example systems without drain fields. This inspection is not designed to determine precise code compliance, nor precise information to demonstrate that the system will adequately serve the use to be placed on it by this or any subsequent owner.

A copy of this inspection must be provided to:
 Citrus County Environmental Health
 3650 W Sovereign Path, Suite 2
 Lecanto, FL 34461
 Fax: (352) 527-5664

X: *Cheryl Doty*

X: *[Signature]*