



**ANGELA VICK**

CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FLORIDA

Clerk of the County Court  
Recorder of Deeds  
Clerk and Accountant of the Board of County Commissioners  
Custodian of County Funds  
County Auditor

110 North Apopka Ave  
Inverness, FL 34450  
Telephone: (352) 341-6478  
Fax: (352) 341-6477  
TaxDeeds@citrusclerk.org  
www.citrusclerk.org

**NOTICE OF SURPLUS FUNDS FROM TAX DEED SALE**

Date: 4/28/2021

Tax Deed #: 2021-0003TD

Certificate #: 18-4606

DESCRIPTION OF PROPERTY:

CITRUS SPGS UNIT 9 PB 6 PG 61 LOT 20 BLK 619

Pursuant to chapter 197, Florida Statutes, the above property was sold at public sale on 4/21/2021 10:00:00AM, and a surplus of \$5,955.89 (subject to change) will be held by this office for **120 days** beginning on the date of this notice to benefit the persons having an interest in this property as described in section 197.502(4), Florida Statutes, as their interests may appear (except for those persons described in section 197.502(4)(h), Florida Statutes).

To the extent possible, these funds will be used to satisfy in full, each claimant with a senior mortgage or lien in the property before distribution of any funds to any junior mortgage or lien claimant or to the former property owner. To be considered for payment of any portion of the surplus funds, **you must file a notarized statement of claim with this office within 120 days of this notice.** If you are a lienholder, your claim must include the particulars of your lien and the amounts currently due.

A copy of this notice must be attached to your statement of claim. After examination of the statements of claim filed, this office will disburse according to priority. For your convenience, a claim form is included with this notice.

**THE FAILURE OF A LIENHOLDER TO FILE A CLAIM FOR SURPLUS FUNDS WITHIN 120 DAYS OF THIS NOTICE CONSTITUTES A WAIVER OF THE LIENHOLDER'S INTEREST IN THE SURPLUS FUNDS AND ALL CLAIMS THERETO ARE FOREVER BARRED.**

If your claim has been satisfied, released, or you are waiving your claim, please check the "No claim will be filed" box on the claim form and return it to our office so that any other liens can be considered.

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CITRUS COUNTY, FL

By: Tifani L. White

Tifani L. White, Deputy Clerk



**AFFIDAVIT OF CLAIM TO SURPLUS PROCEEDS OF A TAX DEED SALE**

Complete and return to:

ANGELA VICK, Clerk Of The Circuit Court And Comptroller  
Tax Deeds Department  
110 North Apopka Ave  
Inverness, FL 34450

Telephone: (352) 341-6478  
Email: TaxDeeds@citrusclerk.org

Tax Deed #: 2021-0003TD Certificate #: 18-4606 Date of Sale: 4/21/2021

**NOTE: CLAIMS MUST BE FILED WITHIN 120 DAYS OF THE DATE OF THE SURPLUS NOTICE OR THEY ARE BARRERD, OTHER THAN PROPERTY OWNER CLAIMS.**

**The Clerk of the Court must pay all valid liens before distributing surplus funds to a titleholder.**

Claimant's name: \_\_\_\_\_

Contact name, if applicable: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Tax No.: \_\_\_\_\_ Date of Sale (if known): \_\_\_\_\_

I am a (check one):  Lienholder  Titleholder

Select ONE:

\_\_\_\_\_ I claim surplus proceeds resulting from the above tax deed sale.

\_\_\_\_\_ I am NOT making a claim and waive any claim I might have to the surplus funds on this tax deed sale.

**1. LIENHOLDER INFORMATION (Complete if claim is based on a lien against the sold property.)**

A. Type of Lien: \_\_\_\_\_ Mortgage; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Condo of Homeowner Association Lien;

\_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your lien is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Original Lien

Amount: \$ \_\_\_\_\_ Amount due: \$ \_\_\_\_\_ Principal Remaining Due: \$ \_\_\_\_\_

Interest Due: \$ \_\_\_\_\_ Fees & Costs • \$ \_\_\_\_\_ Attorney fees claimed: \$ \_\_\_\_\_

\* Including late fees. Describe costs in detail, including additional sheet if needed: \_\_\_\_\_

**2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property *and provide proof.*)**

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your former title is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Amount of surplus tax deed sale proceeds claimed: \$ \_\_\_\_\_

C. Does the titleholder claim the subject property was homestead property? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. I request that payment of any surplus funds due me be made payable to: \_\_\_\_\_

and such payment be mailed to either the address above or to: \_\_\_\_\_.

4. I hereby swear or affirm that all of the above information is true and correct.

Signature of Claimant: \_\_\_\_\_ Print Name & Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ Physical Presence  
COUNTY OF \_\_\_\_\_ Online Notarization

The foregoing instrument was sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_, who is personally know to me \_\_\_\_\_ or has produced \_\_\_\_\_ as identification and who did take an oath.

My Commission Expires: \_\_\_\_\_

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary]



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Tax Deed #: 2021-0003TD Certificate #: 18-4606 Date of Sale: 4/21/2021

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COUNTY OF \_\_\_\_\_ \_\_\_\_\_ Online Notarization

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NOTARY PUBLIC or DEPUTY CLERK My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
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**B. Original Lien**

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**2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property *and provide proof.*)**

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your former title is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Amount of surplus tax deed sale proceeds claimed: \$ \_\_\_\_\_

C. Does the titleholder claim the subject property was homestead property? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. I request that payment of any surplus funds due me be made payable to: \_\_\_\_\_  
and such payment be mailed to either the address above or to: \_\_\_\_\_.

**4. I hereby swear or affirm that all of the above information is true and correct.**

Signature of Claimant: \_\_\_\_\_ Print Name & Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ \_\_\_\_\_ Physical Presence  
COUNTY OF \_\_\_\_\_ \_\_\_\_\_ Online Notarization

The foregoing instrument was sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_,  
who is personally know to me \_\_\_\_\_ or has produced \_\_\_\_\_  
as identification and who did take an oath.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary]



**ANGELA VICK**

CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FLORIDA

Clerk of the County Court  
Recorder of Deeds  
Clerk and Accountant of the Board of County Commissioners  
Custodian of County Funds  
County Auditor

110 North Apopka Ave  
Inverness, FL 34450  
Telephone: (352) 341-6478  
Fax: (352) 341-6477  
TaxDeeds@citrusclerk.org  
www.citrusclerk.org

**NOTICE OF SURPLUS FUNDS FROM TAX DEED SALE**

Date: 4/28/2021

Tax Deed #: 2021-0003TD

Certificate #: 18-4606

DESCRIPTION OF PROPERTY:

CITRUS SPGS UNIT 9 PB 6 PG 61 LOT 20 BLK 619

Pursuant to chapter 197, Florida Statutes, the above property was sold at public sale on 4/21/2021 10:00:00AM, and a surplus of \$5,955.89 (subject to change) will be held by this office for **120 days** beginning on the date of this notice to benefit the persons having an interest in this property as described in section 197.502(4), Florida Statutes, as their interests may appear (except for those persons described in section 197.502(4)(h), Florida Statutes).

To the extent possible, these funds will be used to satisfy in full, each claimant with a senior mortgage or lien in the property before distribution of any funds to any junior mortgage or lien claimant or to the former property owner. To be considered for payment of any portion of the surplus funds, **you must file a notarized statement of claim with this office within 120 days of this notice.** If you are a lienholder, your claim must include the particulars of your lien and the amounts currently due.

A copy of this notice must be attached to your statement of claim. After examination of the statements of claim filed, this office will disburse according to priority. For your convenience, a claim form is included with this notice.

**THE FAILURE OF A LIENHOLDER TO FILE A CLAIM FOR SURPLUS FUNDS WITHIN 120 DAYS OF THIS NOTICE CONSTITUTES A WAIVER OF THE LIENHOLDER'S INTEREST IN THE SURPLUS FUNDS AND ALL CLAIMS THERETO ARE FOREVER BARRED.**

If your claim has been satisfied, released, or you are waiving your claim, please check the "No claim will be filed" box on the claim form and return it to our office so that any other liens can be considered.

ANGELA VICK  
CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FL

By: Tifani L. White

Tifani L. White, Deputy Clerk



**AFFIDAVIT OF CLAIM TO SURPLUS PROCEEDS OF A TAX DEED SALE**

Complete and return to:

ANGELA VICK, Clerk Of The Circuit Court And Comptroller  
Tax Deeds Department  
110 North Apopka Ave  
Inverness, FL 34450

Telephone: (352) 341-6478  
Email: TaxDeeds@citrusclerk.org

Tax Deed #: 2021-0003TD Certificate #: 18-4606 Date of Sale: 4/21/2021

**NOTE: CLAIMS MUST BE FILED WITHIN 120 DAYS OF THE DATE OF THE SURPLUS NOTICE OR THEY ARE BARRED, OTHER THAN PROPERTY OWNER CLAIMS.**

**The Clerk of the Court must pay all valid liens before distributing surplus funds to a titleholder.**

Claimant's name: \_\_\_\_\_  
Contact name, if applicable: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Tax No.: \_\_\_\_\_ Date of Sale (if known): \_\_\_\_\_

I am a (check one):  Lienholder  Titleholder

Select ONE:

\_\_\_\_\_ I claim surplus proceeds resulting from the above tax deed sale.  
\_\_\_\_\_ I am NOT making a claim and waive any claim I might have to the surplus funds on this tax deed sale.

**1. LIENHOLDER INFORMATION (Complete if claim is based on a lien against the sold property.)**

A. Type of Lien: \_\_\_\_\_ Mortgage; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Condo of Homeowner Association Lien;  
\_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your lien is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

**B. Original Lien**

Amount: \$ \_\_\_\_\_ Amount due: \$ \_\_\_\_\_ Principal Remaining Due: \$ \_\_\_\_\_

Interest Due: \$ \_\_\_\_\_ Fees & Costs \* \$ \_\_\_\_\_ Attorney fees claimed: \$ \_\_\_\_\_

\* Including late fees. Describe costs in detail, including additional sheet if needed: \_\_\_\_\_

**2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property *and provide proof.*)**

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your former title is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Amount of surplus tax deed sale proceeds claimed: \$ \_\_\_\_\_

C. Does the titleholder claim the subject property was homestead property? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. I request that payment of any surplus funds due me be made payable to: \_\_\_\_\_  
and such payment be mailed to either the address above or to: \_\_\_\_\_.

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Signature of Claimant: \_\_\_\_\_ Print Name & Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ \_\_\_\_\_ Physical Presence  
COUNTY OF \_\_\_\_\_ \_\_\_\_\_ Online Notarization

The foregoing instrument was sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_,  
who is personally know to me \_\_\_\_\_ or has produced \_\_\_\_\_  
as identification and who did take an oath.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary]



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CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FLORIDA

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**NOTICE OF SURPLUS FUNDS FROM TAX DEED SALE**

Date: 4/28/2021

Tax Deed #: 2021-0003TD

Certificate #: 18-4606

DESCRIPTION OF PROPERTY:

CITRUS SPGS UNIT 9 PB 6 PG 61 LOT 20 BLK 619

Pursuant to chapter 197, Florida Statutes, the above property was sold at public sale on 4/21/2021 10:00:00AM, and a surplus of \$5,955.89 (subject to change) will be held by this office for **120 days** beginning on the date of this notice to benefit the persons having an interest in this property as described in section 197.502(4), Florida Statutes, as their interests may appear (except for those persons described in section 197.502(4)(h), Florida Statutes).

To the extent possible, these funds will be used to satisfy in full, each claimant with a senior mortgage or lien in the property before distribution of any funds to any junior mortgage or lien claimant or to the former property owner. To be considered for payment of any portion of the surplus funds, **you must file a notarized statement of claim with this office within 120 days of this notice.** If you are a lienholder, your claim must include the particulars of your lien and the amounts currently due.

A copy of this notice must be attached to your statement of claim. After examination of the statements of claim filed, this office will disburse according to priority. For your convenience, a claim form is included with this notice.

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ANGELA VICK  
CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FL

By: Tifani L. White

Tifani L. White, Deputy Clerk



**AFFIDAVIT OF CLAIM TO SURPLUS PROCEEDS OF A TAX DEED SALE**

Complete and return to:

ANGELA VICK, Clerk Of The Circuit Court And Comptroller  
Tax Deeds Department  
110 North Apopka Ave  
Inverness, FL 34450

Telephone: (352) 341-6478  
Email: TaxDeeds@citrusclerk.org

Tax Deed #: 2021-0003TD Certificate #: 18-4606 Date of Sale: 4/21/2021

**NOTE: CLAIMS MUST BE FILED WITHIN 120 DAYS OF THE DATE OF THE SURPLUS NOTICE OR THEY ARE BARRED, OTHER THAN PROPERTY OWNER CLAIMS.**

**The Clerk of the Court must pay all valid liens before distributing surplus funds to a titleholder.**

Claimant's name: \_\_\_\_\_  
Contact name, if applicable: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Tax No.: \_\_\_\_\_ Date of Sale (if known): \_\_\_\_\_

I am a (check one):  Lienholder  Titleholder

Select ONE:

\_\_\_\_\_ I claim surplus proceeds resulting from the above tax deed sale.  
\_\_\_\_\_ I am NOT making a claim and waive any claim I might have to the surplus funds on this tax deed sale.

**1. LIENHOLDER INFORMATION (Complete if claim is based on a lien against the sold property.)**

A. Type of Lien: \_\_\_\_\_ Mortgage; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Condo of Homeowner Association Lien;  
\_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your lien is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

**B. Original Lien**

Amount: \$ \_\_\_\_\_ Amount due: \$ \_\_\_\_\_ Principal Remaining Due: \$ \_\_\_\_\_

Interest Due: \$ \_\_\_\_\_ Fees & Costs \* \$ \_\_\_\_\_ Attorney fees claimed: \$ \_\_\_\_\_

\* Including late fees. Describe costs in detail, including additional sheet if needed: \_\_\_\_\_

**2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property *and provide proof.*)**

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your former title is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Amount of surplus tax deed sale proceeds claimed: \$ \_\_\_\_\_

C. Does the titleholder claim the subject property was homestead property? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. I request that payment of any surplus funds due me be made payable to: \_\_\_\_\_  
and such payment be mailed to either the address above or to: \_\_\_\_\_.

**4. I hereby swear or affirm that all of the above information is true and correct.**

Signature of Claimant: \_\_\_\_\_ Print Name & Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ \_\_\_\_\_ Physical Presence  
COUNTY OF \_\_\_\_\_ \_\_\_\_\_ Online Notarization

The foregoing instrument was sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_,  
who is personally know to me \_\_\_\_\_ or has produced \_\_\_\_\_  
as identification and who did take an oath.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary]



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CITRUS COUNTY, FLORIDA

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TaxDeeds@citrusclerk.org  
www.citrusclerk.org

**NOTICE OF SURPLUS FUNDS FROM TAX DEED SALE**

Date: 4/28/2021

Tax Deed #: 2021-0003TD

Certificate #: 18-4606

DESCRIPTION OF PROPERTY:

CITRUS SPGS UNIT 9 PB 6 PG 61 LOT 20 BLK 619

Pursuant to chapter 197, Florida Statutes, the above property was sold at public sale on 4/21/2021 10:00:00AM, and a surplus of \$5,955.89 (subject to change) will be held by this office for **120 days** beginning on the date of this notice to benefit the persons having an interest in this property as described in section 197.502(4), Florida Statutes, as their interests may appear (except for those persons described in section 197.502(4)(h), Florida Statutes).

To the extent possible, these funds will be used to satisfy in full, each claimant with a senior mortgage or lien in the property before distribution of any funds to any junior mortgage or lien claimant or to the former property owner. To be considered for payment of any portion of the surplus funds, **you must file a notarized statement of claim with this office within 120 days of this notice.** If you are a lienholder, your claim must include the particulars of your lien and the amounts currently due.

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ANGELA VICK  
CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FL

By: Tifani L. White

Tifani L. White, Deputy Clerk



**AFFIDAVIT OF CLAIM TO SURPLUS PROCEEDS OF A TAX DEED SALE**

Complete and return to:

ANGELA VICK, Clerk Of The Circuit Court And Comptroller  
Tax Deeds Department  
110 North Apopka Ave  
Inverness, FL 34450

Telephone: (352) 341-6478  
Email: TaxDeeds@citrusclerk.org

Tax Deed #: 2021-0003TD Certificate #: 18-4606 Date of Sale: 4/21/2021

**NOTE: CLAIMS MUST BE FILED WITHIN 120 DAYS OF THE DATE OF THE SURPLUS NOTICE OR THEY ARE BARRED, OTHER THAN PROPERTY OWNER CLAIMS.**

**The Clerk of the Court must pay all valid liens before distributing surplus funds to a titleholder.**

Claimant's name: \_\_\_\_\_  
Contact name, if applicable: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Tax No.: \_\_\_\_\_ Date of Sale (if known): \_\_\_\_\_

I am a (check one):  Lienholder  Titleholder

Select ONE:

\_\_\_\_\_ I claim surplus proceeds resulting from the above tax deed sale.  
\_\_\_\_\_ I am NOT making a claim and waive any claim I might have to the surplus funds on this tax deed sale.

**1. LIENHOLDER INFORMATION (Complete if claim is based on a lien against the sold property.)**

A. Type of Lien: \_\_\_\_\_ Mortgage; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Condo of Homeowner Association Lien;  
\_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your lien is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

**B. Original Lien**

Amount: \$ \_\_\_\_\_ Amount due: \$ \_\_\_\_\_ Principal Remaining Due: \$ \_\_\_\_\_

Interest Due: \$ \_\_\_\_\_ Fees & Costs \* \$ \_\_\_\_\_ Attorney fees claimed: \$ \_\_\_\_\_

\* Including late fees. Describe costs in detail, including additional sheet if needed: \_\_\_\_\_

**2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property *and provide proof.*)**

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your former title is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Amount of surplus tax deed sale proceeds claimed: \$ \_\_\_\_\_

C. Does the titleholder claim the subject property was homestead property? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. I request that payment of any surplus funds due me be made payable to: \_\_\_\_\_  
and such payment be mailed to either the address above or to: \_\_\_\_\_.

**4. I hereby swear or affirm that all of the above information is true and correct.**

Signature of Claimant: \_\_\_\_\_ Print Name & Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ \_\_\_\_\_ Physical Presence  
COUNTY OF \_\_\_\_\_ \_\_\_\_\_ Online Notarization

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\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary]



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CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FLORIDA

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Fax: (352) 341-6477  
TaxDeeds@citrusclerk.org  
www.citrusclerk.org

**NOTICE OF SURPLUS FUNDS FROM TAX DEED SALE**

Date: 4/28/2021

Tax Deed #: 2021-0003TD

Certificate #: 18-4606

DESCRIPTION OF PROPERTY:

CITRUS SPGS UNIT 9 PB 6 PG 61 LOT 20 BLK 619

Pursuant to chapter 197, Florida Statutes, the above property was sold at public sale on 4/21/2021 10:00:00AM, and a surplus of \$5,955.89 (subject to change) will be held by this office for **120 days** beginning on the date of this notice to benefit the persons having an interest in this property as described in section 197.502(4), Florida Statutes, as their interests may appear (except for those persons described in section 197.502(4)(h), Florida Statutes).

To the extent possible, these funds will be used to satisfy in full, each claimant with a senior mortgage or lien in the property before distribution of any funds to any junior mortgage or lien claimant or to the former property owner. To be considered for payment of any portion of the surplus funds, **you must file a notarized statement of claim with this office within 120 days of this notice.** If you are a lienholder, your claim must include the particulars of your lien and the amounts currently due.

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If your claim has been satisfied, released, or you are waiving your claim, please check the "No claim will be filed" box on the claim form and return it to our office so that any other liens can be considered.

ANGELA VICK  
CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FL

By: Tifani L. White

Tifani L. White, Deputy Clerk



**AFFIDAVIT OF CLAIM TO SURPLUS PROCEEDS OF A TAX DEED SALE**

Complete and return to:

ANGELA VICK, Clerk Of The Circuit Court And Comptroller  
Tax Deeds Department  
110 North Apopka Ave  
Inverness, FL 34450

Telephone: (352) 341-6478  
Email: TaxDeeds@citrusclerk.org

Tax Deed #: 2021-0003TD Certificate #: 18-4606 Date of Sale: 4/21/2021

**NOTE: CLAIMS MUST BE FILED WITHIN 120 DAYS OF THE DATE OF THE SURPLUS NOTICE OR THEY ARE BARRED, OTHER THAN PROPERTY OWNER CLAIMS.**

**The Clerk of the Court must pay all valid liens before distributing surplus funds to a titleholder.**

Claimant's name: \_\_\_\_\_  
Contact name, if applicable: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Tax No.: \_\_\_\_\_ Date of Sale (if known): \_\_\_\_\_

I am a (check one):  Lienholder  Titleholder

Select ONE:

\_\_\_\_\_ I claim surplus proceeds resulting from the above tax deed sale.  
\_\_\_\_\_ I am NOT making a claim and waive any claim I might have to the surplus funds on this tax deed sale.

**1. LIENHOLDER INFORMATION (Complete if claim is based on a lien against the sold property.)**

A. Type of Lien: \_\_\_\_\_ Mortgage; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Condo of Homeowner Association Lien;  
\_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

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Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

**B. Original Lien**

Amount: \$ \_\_\_\_\_ Amount due: \$ \_\_\_\_\_ Principal Remaining Due: \$ \_\_\_\_\_

Interest Due: \$ \_\_\_\_\_ Fees & Costs \* \$ \_\_\_\_\_ Attorney fees claimed: \$ \_\_\_\_\_

\* Including late fees. Describe costs in detail, including additional sheet if needed: \_\_\_\_\_

**2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property *and provide proof.*)**

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

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Signature of Claimant: \_\_\_\_\_ Print Name & Title: \_\_\_\_\_

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COUNTY OF \_\_\_\_\_ \_\_\_\_\_ Online Notarization

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\_\_\_\_\_  
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**NOTICE OF SURPLUS FUNDS FROM TAX DEED SALE**

Date: 4/28/2021

Tax Deed #: 2021-0003TD

Certificate #: 18-4606

DESCRIPTION OF PROPERTY:

CITRUS SPGS UNIT 9 PB 6 PG 61 LOT 20 BLK 619

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CITRUS COUNTY, FL

By: Tifani L. White

Tifani L. White, Deputy Clerk



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Email: TaxDeeds@citrusclerk.org

Tax Deed #: 2021-0003TD Certificate #: 18-4606 Date of Sale: 4/21/2021

**NOTE: CLAIMS MUST BE FILED WITHIN 120 DAYS OF THE DATE OF THE SURPLUS NOTICE OR THEY ARE BARRED, OTHER THAN PROPERTY OWNER CLAIMS.**

**The Clerk of the Court must pay all valid liens before distributing surplus funds to a titleholder.**

Claimant's name: \_\_\_\_\_  
Contact name, if applicable: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Tax No.: \_\_\_\_\_ Date of Sale (if known): \_\_\_\_\_

I am a (check one):  Lienholder  Titleholder

Select ONE:

\_\_\_\_\_ I claim surplus proceeds resulting from the above tax deed sale.  
\_\_\_\_\_ I am NOT making a claim and waive any claim I might have to the surplus funds on this tax deed sale.

**1. LIENHOLDER INFORMATION (Complete if claim is based on a lien against the sold property.)**

A. Type of Lien: \_\_\_\_\_ Mortgage; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Condo of Homeowner Association Lien;  
\_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your lien is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

**B. Original Lien**

Amount: \$ \_\_\_\_\_ Amount due: \$ \_\_\_\_\_ Principal Remaining Due: \$ \_\_\_\_\_

Interest Due: \$ \_\_\_\_\_ Fees & Costs \* \$ \_\_\_\_\_ Attorney fees claimed: \$ \_\_\_\_\_

\* Including late fees. Describe costs in detail, including additional sheet if needed: \_\_\_\_\_

**2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property *and provide proof.*)**

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your former title is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Amount of surplus tax deed sale proceeds claimed: \$ \_\_\_\_\_

C. Does the titleholder claim the subject property was homestead property? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. I request that payment of any surplus funds due me be made payable to: \_\_\_\_\_  
and such payment be mailed to either the address above or to: \_\_\_\_\_.

4. **I hereby swear or affirm that all of the above information is true and correct.**

Signature of Claimant: \_\_\_\_\_ Print Name & Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ \_\_\_\_\_ Physical Presence  
COUNTY OF \_\_\_\_\_ \_\_\_\_\_ Online Notarization

The foregoing instrument was sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_, who is personally know to me \_\_\_\_\_ or has produced \_\_\_\_\_ as identification and who did take an oath.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary]



**ANGELA VICK**

CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FLORIDA

Clerk of the County Court  
Recorder of Deeds  
Clerk and Accountant of the Board of County Commissioners  
Custodian of County Funds  
County Auditor

110 North Apopka Ave  
Inverness, FL 34450  
Telephone: (352) 341-6478  
Fax: (352) 341-6477  
TaxDeeds@citrusclerk.org  
www.citrusclerk.org

**NOTICE OF SURPLUS FUNDS FROM TAX DEED SALE**

Date: 4/28/2021

Tax Deed #: 2021-0003TD

Certificate #: 18-4606

DESCRIPTION OF PROPERTY:

CITRUS SPGS UNIT 9 PB 6 PG 61 LOT 20 BLK 619

Pursuant to chapter 197, Florida Statutes, the above property was sold at public sale on 4/21/2021 10:00:00AM, and a surplus of \$5,955.89 (subject to change) will be held by this office for **120 days** beginning on the date of this notice to benefit the persons having an interest in this property as described in section 197.502(4), Florida Statutes, as their interests may appear (except for those persons described in section 197.502(4)(h), Florida Statutes).

To the extent possible, these funds will be used to satisfy in full, each claimant with a senior mortgage or lien in the property before distribution of any funds to any junior mortgage or lien claimant or to the former property owner. To be considered for payment of any portion of the surplus funds, **you must file a notarized statement of claim with this office within 120 days of this notice.** If you are a lienholder, your claim must include the particulars of your lien and the amounts currently due.

A copy of this notice must be attached to your statement of claim. After examination of the statements of claim filed, this office will disburse according to priority. For your convenience, a claim form is included with this notice.

**THE FAILURE OF A LIENHOLDER TO FILE A CLAIM FOR SURPLUS FUNDS WITHIN 120 DAYS OF THIS NOTICE CONSTITUTES A WAIVER OF THE LIENHOLDER'S INTEREST IN THE SURPLUS FUNDS AND ALL CLAIMS THERETO ARE FOREVER BARRED.**

If your claim has been satisfied, released, or you are waiving your claim, please check the "No claim will be filed" box on the claim form and return it to our office so that any other liens can be considered.

ANGELA VICK  
CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FL

By: Tifani L. White

Tifani L. White, Deputy Clerk



**AFFIDAVIT OF CLAIM TO SURPLUS PROCEEDS OF A TAX DEED SALE**

Complete and return to:

ANGELA VICK, Clerk Of The Circuit Court And Comptroller  
Tax Deeds Department  
110 North Apopka Ave  
Inverness, FL 34450

Telephone: (352) 341-6478  
Email: TaxDeeds@citrusclerk.org

Tax Deed #: 2021-0003TD Certificate #: 18-4606 Date of Sale: 4/21/2021

**NOTE: CLAIMS MUST BE FILED WITHIN 120 DAYS OF THE DATE OF THE SURPLUS NOTICE OR THEY ARE BARRED, OTHER THAN PROPERTY OWNER CLAIMS.**

**The Clerk of the Court must pay all valid liens before distributing surplus funds to a titleholder.**

Claimant's name: \_\_\_\_\_  
Contact name, if applicable: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Tax No.: \_\_\_\_\_ Date of Sale (if known): \_\_\_\_\_

I am a (check one):  Lienholder  Titleholder

Select ONE:

\_\_\_\_\_ I claim surplus proceeds resulting from the above tax deed sale.  
\_\_\_\_\_ I am NOT making a claim and waive any claim I might have to the surplus funds on this tax deed sale.

**1. LIENHOLDER INFORMATION (Complete if claim is based on a lien against the sold property.)**

A. Type of Lien: \_\_\_\_\_ Mortgage; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Condo of Homeowner Association Lien;  
\_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your lien is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

**B. Original Lien**

Amount: \$ \_\_\_\_\_ Amount due: \$ \_\_\_\_\_ Principal Remaining Due: \$ \_\_\_\_\_

Interest Due: \$ \_\_\_\_\_ Fees & Costs \* \$ \_\_\_\_\_ Attorney fees claimed: \$ \_\_\_\_\_

\* Including late fees. Describe costs in detail, including additional sheet if needed: \_\_\_\_\_

**2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property *and provide proof.*)**

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

If your former title is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Amount of surplus tax deed sale proceeds claimed: \$ \_\_\_\_\_

C. Does the titleholder claim the subject property was homestead property? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. I request that payment of any surplus funds due me be made payable to: \_\_\_\_\_  
and such payment be mailed to either the address above or to: \_\_\_\_\_.

**4. I hereby swear or affirm that all of the above information is true and correct.**

Signature of Claimant: \_\_\_\_\_ Print Name & Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ \_\_\_\_\_ Physical Presence  
COUNTY OF \_\_\_\_\_ \_\_\_\_\_ Online Notarization

The foregoing instrument was sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_, who is personally know to me \_\_\_\_\_ or has produced \_\_\_\_\_ as identification and who did take an oath.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary]

AFFIDAVIT OF CLAIM TO SURPLUS PROCEEDS OF A TAX DEED SALE

Complete and return to:

ANGELA VICK, Clerk Of The Circuit Court And Comptroller  
Tax Deeds Department  
110 North Apopka Ave  
Inverness, FL 34450

Telephone (352) 341-6478  
Email: TaxDeeds@citrusclerk.org

Tax Deed #: 2021-0003TD Certificate #: 18-4606 Date of Sale: 4/21/2021

NOTE: CLAIMS MUST BE FILED WITHIN 120 DAYS OF THE DATE OF THE SURPLUS NOTICE OR THEY ARE BARRED, OTHER THAN PROPERTY OWNER CLAIMS.

The Clerk of the Court must pay all valid liens before distributing surplus funds to a titleholder.

Claimant's name: New Vista Properties Inc.

Contact name, if applicable: John Ehrling

Address: 3000 Governors Square Blvd. Ste. 200 Miami Lakes, FL

Phone Number: 305-712-1919

Email address: john@thefloridastore.us

Tax No.: 65-09 66273 Date of Sale (if known): \_\_\_\_\_

I am a (check one):  Lienholder  Titleholder

Select ONE:

I claim surplus proceeds resulting from the above tax deed sale.

I am NOT making a claim and waive any claim I might have to the surplus funds on this tax deed sale.

1. LIENHOLDER INFORMATION (Complete if claim is based on a lien against the sold property.)

A. Type of Lien:  Mortgage;  Court Judgment;  Condo of Homeowner Association Lien;

Other - describe in detail: \_\_\_\_\_

If your lien is recorded in CITRUS COUNTY's Official Records, list the following, if known:

Recording Date: 10/9/2014 Instrument #: 2014044816 Book/Page #: 2649 / 401

B. Original Lien

Amount: \$ 23,490 Amount due: \$ 22,554.02 Principal Remaining Due: \$ 22,554.02

Interest Due: \$ \_\_\_\_\_ Fees & Costs \* \$ \_\_\_\_\_ Attorney fees claimed: \$ \_\_\_\_\_

\* Including late fees. Describe costs in detail, including additional sheet if needed: \_\_\_\_\_

2. TITLEHOLDER INFORMATION (Complete if claim is based on title formerly held on sold property and provide proof.)

A. Nature of Title: \_\_\_\_\_ Deed; \_\_\_\_\_ Court Judgment; \_\_\_\_\_ Other - describe in detail: \_\_\_\_\_

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Recording Date: \_\_\_\_\_ Instrument #: \_\_\_\_\_ Book/Page #: \_\_\_\_\_ / \_\_\_\_\_

B. Amount of surplus tax deed sale proceeds claimed: \$ \_\_\_\_\_

C. Does the titleholder claim the subject property was homestead property?  Yes  No

3. I request that payment of any surplus funds due me be made payable to: New Vista Properties Inc. and such payment be mailed to either the address above or to: \_\_\_\_\_

4. I hereby swear or affirm that all of the above information is true and correct.

Signature of Claimant: [Signature] Print Name & Title: John Ehrling - President

STATE OF Florida  Physical Presence  
COUNTY OF Dade  Online Notarization

The foregoing instrument was sworn to or affirmed and signed before me this 5 day of May, 2021 by John Ehrling, who is personally known to me  or has produced \_\_\_\_\_ as identification and who did take an oath.

[Signature]  
NOTARY PUBLIC OR DEPUTY CLERK  
**JONATHAN HERNANDEZ**

My Commission Expires: \_\_\_\_\_

[Print, type, or stamp commissioned name of notary]





**ANGELA VICK**

CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FLORIDA

Clerk of the County Court  
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**NOTICE OF SURPLUS FUNDS FROM TAX DEED SALE**

Date: 4/28/2021

Tax Deed #: 2021-0003TD

Certificate #: 18-4606

**DESCRIPTION OF PROPERTY:**

CITRUS SPGS UNIT 9 PB 6 PG 61 LOT 20 BLK 619

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To the extent possible, these funds will be used to satisfy in full, each claimant with a senior mortgage or lien in the property before distribution of any funds to any junior mortgage or lien claimant or to the former property owner. To be considered for payment of any portion of the surplus funds, **you must file a notarized statement of claim with this office within 120 days of this notice.** If you are a lienholder, your claim must include the particulars of your lien and the amounts currently due.

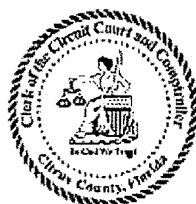
A copy of this notice must be attached to your statement of claim. After examination of the statements of claim filed, this office will disburse according to priority. For your convenience, a claim form is included with this notice.

**THE FAILURE OF A LIENHOLDER TO FILE A CLAIM FOR SURPLUS FUNDS WITHIN 120 DAYS OF THIS NOTICE CONSTITUTES A WAIVER OF THE LIENHOLDER'S INTEREST IN THE SURPLUS FUNDS AND ALL CLAIMS THERETO ARE FOREVER BARRED.**

If your claim has been satisfied, released, or you are waiving your claim, please check the "No claim will be filed" box on the claim form and return it to our office so that any other liens can be considered.

ANGELA VICK  
CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
CITRUS COUNTY, FL

By: Tifani L. White  
Tifani L. White, Deputy Clerk



LOAN HISTORY  
5674-DARREN O. WADE

Date Received	Date Due	Reference	ACH/Electronic Payment	Has Notes	Payment Code	Total Amount Received	Applied To Interest	Applied To Principal	Principal Balance
03/09/2014	03/09/2014	P.Price			Funding	\$0.00	\$0.00	-\$24,990.00	\$24,990.00
03/09/2014	03/09/2014				Oth-DP	\$1,500.00	\$0.00	\$1,500.00	\$23,490.00
04/15/2014	04/15/2014	AUTO CC			RegPmt	\$209.84	\$174.22	\$35.62	\$23,454.38
05/15/2014	05/15/2014	AUTO CC			RegPmt	\$209.84	\$173.95	\$35.89	\$23,418.49
06/16/2014	06/15/2014	AUTOCC			RegPmt	\$209.84	\$173.69	\$36.15	\$23,382.34
07/15/2014	07/15/2014	AUTOCC			RegPmt	\$209.84	\$173.42	\$36.42	\$23,345.92
08/15/2014	08/15/2014	AUTO CC			RegPmt	\$209.84	\$173.15	\$36.69	\$23,309.23
09/15/2014	09/15/2014	AUTO CC			RegPmt	\$209.84	\$172.88	\$36.96	\$23,272.27
10/15/2014	10/15/2014	AUTO CC			RegPmt	\$209.84	\$172.60	\$37.24	\$23,235.03
11/17/2014	11/15/2014	AUTO CC			RegPmt	\$209.84	\$172.33	\$37.51	\$23,197.52
12/24/2014	12/15/2014	CC			RegPmt	\$209.14	\$172.05	\$37.09	\$23,160.43
01/15/2015	01/15/2015	AUTO CC			RegPmt	\$209.84	\$171.77	\$38.07	\$23,122.36
02/16/2015	02/15/2015	AUTO CC			RegPmt	\$209.84	\$171.49	\$38.35	\$23,084.01
03/17/2015	03/15/2015	AUTO CC			RegPmt	\$209.84	\$171.21	\$38.63	\$23,045.38
04/20/2015	04/15/2015	CC			RegPmt	\$209.84	\$170.92	\$38.92	\$23,006.46
05/15/2015	05/15/2015	AUTOCC			RegPmt	\$209.84	\$170.63	\$39.21	\$22,967.25
06/15/2015	06/15/2015	AUTO CC			RegPmt	\$209.84	\$170.34	\$39.50	\$22,927.75
07/15/2015	07/15/2015	AUTO CC			RegPmt	\$209.84	\$170.05	\$39.79	\$22,887.96
08/19/2015	08/15/2015	CC			RegPmt	\$209.84	\$169.75	\$40.09	\$22,847.87
08/19/2015	08/19/2015	COMBO			Funding	\$0.00	\$0.00	\$209.84	\$22,638.03
09/15/2015	09/15/2015	AUTO CC			RegPmt	\$209.84	\$168.08	\$41.76	\$22,596.27
10/29/2015	10/15/2015	CC			RegPmt	\$209.84	\$167.59	\$42.25	\$22,554.02
Remaining Principal Balance									\$22,554.02

5674

THIS FORM PREPARED BY:  
George Vigil  
Rasco Reininger Perez & Esquenazi, P.L.  
283 Catalonia Avenue  
Coral Gables, Florida 33134-6700

Net \$52.50  
Doc \$82.25  
Int \$46.98  
20141310

Official Records Citrus County FL  
Angela Vick, Clerk of the Circuit Court & Comptroller  
#2014044816 BK: 2649 PG: 401  
10/9/2014 1:30 PM 1 Receipt: 40025  
RECORDING \$52.50  
M DOCTAX PD \$82.25 INT TAX PD \$46.98

**PURCHASE MONEY MORTGAGE** **Exhibit "B"** Space above this line for recorder's use

THIS MORTGAGE is made this 23<sup>rd</sup> day of February, 20 14, by and between:

Name(s) DARREN WADE  
VERONICA WADE

Address: C/O NEW VISTA PROPERTIES  
8000 GOVERNORS SQUARE BLVD - SUITE 200  
MIAMI LAKES, FL 33016

("collectively Borrower"); and NEW VISTA PROPERTIES, INC., a Florida corporation ("Lender"), whose address is 8000 Governors Square Boulevard, Suite 200, Miami Lakes, Florida 33016.

The terms Borrower and Lender shall in each instance include their heirs, executors, administrators, successors, legal representatives and assigns.

**WITNESSETH**

For good and valuable consideration and in consideration of the sum named in the Promissory Note, a copy of which is attached as Exhibit "A" hereto, (the "Note") and to secure Lender the payment, with interest thereon, of the indebtedness evidenced by the Note, and to secure the performance of the covenants and agreements of Borrower herein contained, Borrower does hereby mortgage, grant, transfer and assign to Lender, in fee simple, that certain parcel of land located in CITRUS County, Florida, (the "Property") described as follows:

Lot 20, in Block 619 of Section/ Addition Citrus Springs Unit 9,  
a Subdivision according to the Plat thereof, recorded in Plat Book 6, Pages 61 through 66,  
of the public records of CITRUS County, Florida.

Together, with all improvements now or hereafter erected on the Property, and all easements, appurtenances, riparian rights, fixtures, articles of personal property now or hereafter attached to or located in or upon the Property and all awards or payments including interest thereon and the right to receive the same growing out of or resulting from any exercise of the power of eminent domain.

THIS MORTGAGE IS A PURCHASE MONEY OBLIGATION GIVEN BY BORROWER TO LENDER AS SECURITY FOR THE UNPAID BALANCE OF THE COST OF ACQUISITION OF THE PROPERTY BY BORROWER FROM LENDER.

Please see reverse side, which is part of this Mortgage.

Initials DW VG

IN WITNESS WHEREOF Borrower has executed this Mortgage on the day and date first above written.

**Borrower:**

Signed, sealed and delivered in the presence of:

Darren Wade  
Signature of Borrower Darren Wade

R. Khan  
Witness #1 Signature

Print Name: Rahaman Khan

Veronica Wade  
Signature of Borrower Veronica Wade

J. Ehrlich  
Witness #2 Signature

Print Name: John Ehrlich

STATE OF FLORIDA

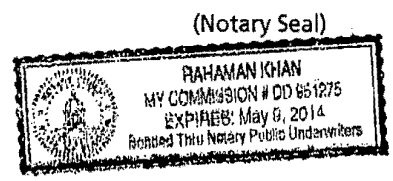
COUNTY OF CITRUS

The foregoing instrument was acknowledged before me this 23<sup>rd</sup> day of FEBRUARY, 2014,  
by Darren Wade & Veronica Wade who is personally known to me  
or who has produced identification, to be the person(s) described in and who executed the foregoing mortgage.

Personally Known  OR Produced Identification

Type of Identification Produced: DL  
(Driver's license, passport, U.S. Armed Forces I.D., a State I.D. Card)

Rahaman Khan Notary Public Signature, Commission No.



RAHAMAN KHAN (Name of Notary typed, printed or stamped)

My Commission Expires:

Please see reverse side, which is part of this Mortgage.

NEW VISTA PROPERTIES



DOCUMENTARY STAMP TAX DUE HEREON HAS BEEN PAID AND STAMPS AFFIXED TO THE MORTGAGE SECURING THIS NOTE.

PROMISSORY NOTE

EXHIBIT "A"

Amount financed:

\$ 23,490.00

FEBRUARY 23<sup>rd</sup>, 2014

Reference is hereby made to that Mortgage between New Vista Properties, Inc. and the undersigned to which this Promissory Note is attached (the "Mortgage"). All terms used herein without definition shall have the meanings assigned to them in the Mortgage or in the Homesite Purchase Contract between New Vista Properties, Inc. ("Contract") and the undersigned Borrower.

For value received, the undersigned (Collectively the "Borrower") promises to pay to the order of New Vista Properties, Inc. at 8000 Governors Square Boulevard, Suite 200, Miami Lakes, Florida 33016 (or such other place as the holder of this Note may designate in writing), the AMOUNT FINANCED, set forth above, together with FINANCE CHARGES thereon, as computed and payable, all as provided in the Federal Truth in Lending Disclosures in the Contract and at the

ANNUAL PERCENTAGE RATE OF 8.9 %.

This Note is secured by a Mortgage on the Property.

This Note is payable under the following terms, which include the terms and conditions on the reverse side of this Note and the Truth in Lending Disclosures on page 1 of the Contract.

This Note shall be construed in accordance with and governed by the laws of the State of Florida. This Note may not be changed or terminated orally.

You have the option to cancel your contract or agreement of sale by notice to the seller until midnight of the seventh day following the signing of the contract or agreement. If you did not receive a Property Report prepared pursuant to the rules and regulations of the Bureau of Consumer Financial Protection, in advance of your signing the contract or agreement, this contract or agreement may be revoked at your option for two years from the date of signing.

Borrower:

Borrower:

Sign: Darren Wade

Sign: Veronica Wade

Print: DARREN WADE

Print: VERONICA WADE

Social Security #: [Redacted]

Social Security #: [Redacted]

Please see reverse side, which is part of this Note.

USA  
9 CLASS B

**Florida** DRIVER LICENSE  
E645-463-70-173-0

SEX: M HT: 5-10 WT: 160 HAIR: B EYES: B  
HAIR COLOR: NONE HAIR NONE

SAPR 1988  
# 85 0370 21218  
500 XST 21218

Operation of this vehicle is contingent upon the driver's compliance with the laws of the State of Florida.

