

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT, IN AND FOR BREVARD COUNTY, FLORIDA	
PROBATE DIVISION	
IN RE: ESTATE OF	<u>STEVEN ALBRIGHT</u>
deceased,	
Case no.:	2025CP037216
Section:	Probate

AFFIDAVIT OF HEIRS
To be completed by an interested party

1. My name is: Melinda Jones, I am at least 18 years of age and
I live at: 344 SW Scenic Ct. Fort White. FL 32088

2. I knew the decedent, Steven Albright, for year(s) and have
an interest in the estate of the decedent as follows: sister and sole surviving heir

3. I am personally familiar with the family and marital history of the decedent and have personal knowledge of the facts stated in this Affidavit. I have written "unknown" if I do not have knowledge of certain information; "none" where there are no individuals of a particular class; "no descendants" where an individual has died without any descendants; and "N/A" for the date of death for any heir who has not died. I will attach additional supplemental Affidavit(s) of Heirs as needed for any requested information that does not fit in the space provided.

4. Provide the following information on the decedent's last spouse:

NAME AND ADDRESS OF LAST SPOUSE	DECEDENT'S MARITAL STATUS AT DEATH	Does the last spouse have any descendants <u>not</u> of the Decedent?
None	☐ Married. ☐ Divorced.	☐ Yes ☐ No
	☐ Date of Death: <u> </u>	

5. Provide the following information regarding the decedent's natural born and adopted children. This includes any children of the decedent from any previous marriage or relationship.

NAME AND ADDRESS OF CHILDREN	YEAR OF BIRTH	DATE OF DEATH	NAME OF CHILD'S OTHER PARENT
None			



If all of the Estate's beneficiaries have been accounted for (i.e., none of the decedent's children have died), you may skip sections 6 - 13, and proceed to the verification on the last page.



6. Provide the following information regarding the decedent's grandchildren, born only to the deceased children in section 5 above. If a grandchild has died, also provide the required information regarding the descendant of the deceased grandchild:

NAME AND ADDRESS OF GRANDCHILDREN	YEAR OF BIRTH	DATE OF DEATH	NAME OF DECEASED PARENT
None			

7. If the decedent was not survived by a spouse or any descendants, provide the following information regarding the decedent's parents:

	NAME AND ADDRESS OF DECEDENT'S PARENTS	DATE OF DEATH
PARENT #1	None	
PARENT #2		

8. If the decedent was not survived by a spouse, descendant, or parent, provide the following information regarding the decedent's brothers and sisters:

NAME AND ADDRESS OF SIBLINGS	HALF-SIBLING?	YEAR OF BIRTH	DATE OF DEATH
Melinda Jones 344 SW Scenic Ct, Fort White, Florida 32038	☐ Yes ☐ No	over 21	
	☐ Yes ☐ No		

9. Provide the following information regarding the deceased's nieces and nephews, born only to the deceased brothers/sisters listed in section 8 above. If a niece/nephew has died, also provide the required information regarding the descendant of the deceased niece/nephew:

NAME AND ADDRESS OF NIECES/NEPHEWS	YEAR OF BIRTH	NAME OF NIECE'S/NEPHEW'S DECEASED PARENT	DATE OF DEATH
None			

10. If the decedent was not survived by a spouse, a descendant, a parent, a sibling, or niece/nephew, provide the following information for the decedent's grandparents:

	NAME AND ADDRESS OF GRANDPARENTS	DATE OF DEATH
PARENT #1	None	
PARENT #1		
PARENT #2		
PARENT #2		

11. Provide the following information regarding the decedent's aunts and uncles, born only to the deceased grandparents listed in section 10 above:

NAME AND ADDRESS OF AUNTS/UNCLES	DATE OF DEATH	NAME OF AUNT/UNCLE'S DECEASED PARENT
None		

12. Provide the following information regarding the decedent's cousins, born only to the deceased aunts and uncles listed in section 10 above. If a cousin has died, indicate as such, and provide the required information regarding the descendant of the deceased cousin:

NAME AND ADDRESS OF COUSINS	YEAR OF BIRTH	DATE OF DEATH	NAME OF COUSIN'S DECEASED PARENT
None			

13. If the decedent was not survived by any members of the classes listed in sections 5 through 12, but was predeceased by a spouse, provide the following information regarding the kindred of the decedent's last spouse (starting with the spouse's children). If a descendant has died, indicate as such, and provide the required information regarding the descendant of the deceased person:

NAME AND ADDRESS OF DESCENDANTS	YEAR OF BIRTH	DATE OF DEATH	NAME OF PARENT AND RELATION TO DECEDENT
None			

Under penalties of perjury, I declare the I have read the foregoing Affidavit of Heirs and the facts stated therein are true.


Signature of Affiant

7/1/25
Date

Melinda Jones
Printed Name of Affiant

344 SW Seaside Ct
Address

Fort White FL 32038
City State Zip

386-984-8043
Telephone Number

melinda.dblporter@gmail.com
Email Address

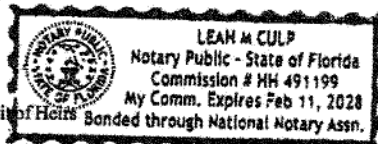
FURTHER AFFIANT SAYETH NAUGHT.

State of Florida
City of Lake City County of Columbia

Sworn to (or affirmed) and subscribed before me, by means of ☒ physical presence or ☐ online notarization, this 1st day of July, 2025 by Melinda Jones, who is personally known to me and/or produced _____ as identification.

My Commission Expires: Feb 11, 2028

[SEAL]




Notary Public

E-7S- Supplemental Affidavit of Heirs
Last Revised 1/4/2022
(AFHR)