

LF298-04
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this Friday day of January, 20 03,
by first party, Grantor, Winston Bradley
whose post office address is 155 Montruse Ave
to second party, Grantee, Lisa Bradley
whose post office address is 155 Montruse Ave

WITNESSETH, That the said first party, for good consideration and for the sum of
zero dollars Dollars (\$ - 0 -)
paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release
and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first
party has in and to the following described parcel of land, and improvements and appurtenances thereto in
the County of Columbia, State of Florida to wit:

The three bedroom home
Lot 13 And A Wedge Shaped Parcel Being 6 Foot Wide on
East End of The North Side of Lot 14. Block 28 Camphor Knoll
Estates. A Subdivision Recorded in Columbia County, Florida

06587-000

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 presence of:

Brian Lewis

Signature of Witness

Brian Lewis

Print name of Witness

Bonnie S. Page

Signature of Witness

BONNIE S. PAGE

Print name of Witness

Winston H. Bradley

Signature of First Party

Winston H. Bradley

Print name of First Party

Signature of First Party

Print name of First Party

State of FLORIDA

County of Columbia

On JAN 23, 2003

before me, Bonnie S. Page, A NOTARY Public

appeared WINSTON H. BRADLEY

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Bonnie S. Page

Signature of Notary



Bonnie S. Page
MY COMMISSION # DD809498 EXPIRES
March 19, 2005
BONDED WITH TROY FARM INSURANCE, INC.

Affiant Known Produced ID
Type of ID FLA DR. LICENSE
B634 888 50 2920 (Seal)

State of

County of

On

before me,

appeared

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature of Notary

Affiant Known Produced ID
Type of ID FLA DR. LICENSE
B634 888 50 2920 (Seal)

Signature of Preparer

Print Name of Preparer

Address of Preparer