Building & Zoning Department P.O. Box 1529 Lake City, FL 32056

Dear Rep,

I (along with my husband Charles Newberry) completed a permit application online. The **permit #69525** is for electrical service. I have included in this letter several documents to explain our circumstances. The property is in the name of my grandmother, Emma Whitfield Estate. And, her only living heirs who once lived on the property are my two aunts. They are Patsy Marshall and Lenan Thomas. They are elderly and can no longer maintain the upkeep, so I have stepped in to help them with their property needs. Patsy Marshall resides in Jacksonville Nursing/Rehab Center in Jacksonville, FL and Lenan Thomas is also elderly and residences in Silver Springs Maryland. I am retired and my husband and I are preparing to make regular visits to the property while making repairs to my aunt's mobile home. We need more electrical service amps than what is currently there and that is the purpose for the permit.

I have included several documents to show that I, Leda Newberry, is also an heir through my mother Louise Johnson who is deceased. I also have full consent from both aunts to increase the electrical service amps as I need or see fit. See attachments:

Document #1: Notarized letters from both Lenan Thomas & Patsy Marshall. Feel free to call or contact them as needed.

Document #2: A copy of the first and last pages of my <u>grandmother's will</u> showing the 2 last living heirs. Patsy's last names may have changed due to a new marriage and Lenan's was misspelled. All the other heirs are deceased including my mother Louise Johnson.

Document #3: A copy of an <u>Easement</u> document where all the heirs were named recently in 2020.

Document #4: A copy of <u>USDA Power of Attorney</u> that Patsy Marshall appointed me to in 2018 to keep up with the programs for her. There is an electronic copy of this form as it states at the top if you wish to check.

Document #5: A recent copy of the <u>utility bill</u> that I have been paying for my aunts since 2011. Notice it comes to my address (in Seffner FL) because Patsy Marshall asked me to keep it going.

Document #6: A copy of the 2024 <u>property tax bill</u> & a copy of a written check. I again have been handling this for both my aunts for several years. It also is mailed to my address.

I am hoping these documents will be sufficient to approve the electrical permit. If there is anything more I may need, please let me know.

Respectfully.

Leda Newberry

13213 Brackley Road Silver Spring, Maryland 20904

March 6, 2025

Building and Zoning Department P.O. Box 1529 Lake City, Florida 32056

TO WHOM IT MAY CONCERN:

My name is Lenan Whitfield Thomas one of the heirs of Emma Whitfield Estate, located at 1609 NW Suwannee Valley Road, Lake City, Florida.

I hereby give permission to my niece Leda Newberry (and spouse Charles Newberry) to apply for and be granted an electrical permit on said property, mentioned above, for the purpose of upgrading the current electrical box from sixty (60) amps to two hundred (200 amps). The current service box has been on the property for many years and is used primarily for the well pump.

My niece (Leda Newberry) is the daughter of my deceased sister Louise Whitfield Johnson, also an heir of the Emma Whitfield Estate, but has been decease for fourteen years.

Additionally, Leda Newberry has been given permission to pay the utility bills, pay property taxes and maintain usable yard areas. This arrangement is in concert with and the consent of other involved heirs. Leda has satisfactorily been performing these duties since 2011.

Your consideration of this request will be greatly appreciated. If you have any questions regarding this matter, please feel free to contact me at 301-384-4329. Thank you.

lenan Whitfield Thomas

RAHEL KEBEDE Notary Public - State of Maryland Howard County My Commission Expires Jul 24, 2027 Witness

Date

Notary

march, 07, 2025.

Date

Building & Zoning Dept. P.O. Box 1529 Lake City, FL 32056

Dear Representative

My name is Patsey Whitfield Marshall, one of the two remaining heirs of the Emma Whitfield Estate, located at 1698 Suwannee Valley Road, Lake City FL, 32055 in Columbia County.

I am writing this letter so that it be known by all that I give my niece, Leda Newberry and her husband (Charles) permission to apply for an electrical permit on our property (on my behalf) for the purpose of upgrading the electrical box. There is a box already on the property that I had installed several years ago. Fortunately, my niece and her husband help me and my only living sister (Lenan) take care of the property. I am currently in a nursing facility in Jacksonville Florida because of my immobility.

Leda Newberry is the daughter of my deceased sister (Louise Whitfield Johnson) who is also an heir of the Emma Whitfield Estate. She also oversees that utilities and taxes are paid on our behalf as well as yard maintenance since 2011. Leda has a brother (Fred) and sister (Sharon) that can perform the same duties if Leda cannot.

All the information in this letter is true and I am willing to get it notarized as proof of my existence and acknowledgement of my relationship to Leda Newberry.

Kindest regards,

Patsey Whitfield Marshall

Bridgette J. Allen 03/01/25

Notary Public State of Fiorida Bridgette James Allen My Commission HH 510538 Expires 4/1/2028

K 0873 PG2148

OF

OFFICIAL RECORDS

EMMA WHITFIELD

I, EMMA WHITFIELD, of the County of Columbia, State of Florida, being of sound and disposing mind and memory, do make this, my Last Will and Testament, hereby revoking and annulling all others by me heretofore made.

1.

I desire and direct that my body be buried in a Christianlike manner suitable to my circumstances in life.

2.

I desire and direct that all of my just debts be paid without unnecessary delay by my Personal Representative hereinafter named and appointed.

3.

I give, devise and bequeath all of my property, both real, personal and mixed, wherever situated, of which I may die seized or possessed, or to which I may be or become in any way entitled or have any interest, or over which I may have any power or appointment, to my six daughters, ROSA MAE BELL, EMMA REEN MARSHALL, SADIE MAE DAVIS, PATSY LEE JOHNSON, LOUISE JOHNSON and LETHA ANN THOMAS, share and share alike. Said property shall include but not be limited to the following described real property, situate, lying and being in Columbia County, Florida, to-wit:

Thirty-two (32) acres square in the Northeast Corner of the NE 1/4 of Section 29, Township 2 South, Range 16 East, except one (1) acre in the Northeast Corner already conveyed to the Florida Power and Light Company.

A

I give and bequeath the sum of One and No/100 (\$1.00) Dollar to each of my sons, ADEL WHITFIELD and CAP JUNIOR WHITFIELD, and it is my express desire and intent that my said sons shall take and receive no sum of money from my estate or any portion of my estate or interest therein except the said sum of \$1.00 each.

ALVA'DUNCAN ATTORIET AT LAN THE EAST MADISON LAKE CITY, FLORIDA 12055

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OK 0873 PG2150

STATE OF FLORIDA

1	Olivia Ol Lacolinali		• •
12 - -	COUNTY OF COLUMBIA		OFFICIAL RECORDS
25 Marie 1990	WE, EMMA WHITFIELD,	Tomi S. Laxton	and
ji T	Alva Duncan , tl	he testatrix and the	witnesses respectively,
),	whose names are signed to th	e attached or forego	oing instrument, being first
	duly sworn, do hereby declar	e to the undersigned	d officer that the testatrix
,	signed the instrument as her	Last Will and Testa	ment and that she signed
1	voluntarily and that each of th	ne witnesses in the p	presence of testatrix, at her
1	request, and in the presence	of each other signed	d the Will as a witness and
e in the second	that to the best of the knowled	dge of each witness	the testatrix was at that
	time 18 or more years of age	e, of sound mind and	l under no constraint or
	undue influence.		
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	Subscribed and acknowled	ged before me by E	MMA WHITFIELD, the
;; ;;	testatrix, and subscribed and	d sworn to before m	e by Tomi S. Laxton
)	and Alva Duncan	, the witnesses, on	December 22, 1977
1		Marin K	a Jones
į,		Notary Public, My Commissio	
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STATE OF FLORUDA, COUNTY OF C	Market Co.	WOLDS LEGG (A	erevat 142° oktobrant <u>erin</u>
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JALES M. SWISHER, R. CLERK OF C			
By The Country			
Date 4150	COLUMB	FILED AND RECORDED IN RECORDS OF COLUMBIA C	I PUBLIS

ALVA DUNCAN ATTORKEY AT LAW 111 EAST MADISON LAKE CITY, FLORIDA 12065

99-01630

RECORD : NOTES

Prepared by and Return to:

William Maudlin Gulf Power Company One Energy Place Pensacola, Florida 32520-0093

Property ID# 29-2S-16-01778-000

EASEMENT

THIS EASEMENT dated this day of , 2020 is by and between PATSY LEE MARSHALL, individually, whose address is 7203 Rhode Island Dr. East Jacksonville, FL 32209; LENAN W. THOMAS, individually, whose address is 13213 Brackley Rd. Silver Spring, MD; LEDA NEWBERRY, individually and on behalf of the ESTATE OF LOUISE JOHNSON, whose address is 6809 Peyton Dr. Ryskin, FL 33570; SHARON LANE, on behalf of the ESTATE OF LOUISE JOHNSON, whose address is 1616 Cabbage Key Dr. Ruskin, FL 33570; and FRED JOHNSON, JR., on behalf of the ESTATE OF LOUISE JOHNSON, whose address is 3461 Natalie Dr. South Jacksonville, FL 32218 ("Owners") and GULF POWER COMPANY, a Florida corporation, its contractors, agents, successors and assigns, whose address is One Energy Place, Pensacola, FL 32520-0093 ("Company"). For and in consideration of the sum of TEN and NO/100 DOLLARS, (\$10.00) and other good and valuable consideration paid by Company, the receipt and sufficiency whereof are hereby acknowledged, Owners do hereby grant, bargain, sell and convey to Company, its contractors, agents, successors, and assigns, easement interests and rights for the purposes described and set forth in the attached Exhibit A in, on, over, under, upon and across the lands located in Columbia County, Florida described as Tract CO-157.000 in the attached Exhibit B, each exhibit being incorporated herein by reference.

(Executions and Acknowledgments on following pages.)

Gulf Power Company – North Florida Resiliency Connection (NFRC) Easement – Tract: CO-157,000

IN WITNESS WHEREOF, the undersigned has signed and sealed this instrument on the date set forth below.

Signed, sealed and delivered in the presence of:

individually and on behalf of the ESTATE OF LOUISE JOHNSON Print Name: Emerald Mong 6809 Peyton Dr Seffner, FL 33584 Witness Signature: Print Name: Kulu ACKNOWLEDGMENT STATE OF Florida COUNTY OF Hilsbomugh The foregoing instrument was acknowledged by means of P physical presence or P online notarization, this 17 day of Month, 2020, before me, the undersigned notary public, personally appeared LEDA NEWBERRY, individually, and on behalf of the ESTATE OF LOUISE JOHNSON, personally known to me to be the person who subscribed to the foregoing instrument or who has produced FLDL as identification, and acknowledged that he/she executed the same on behalf of said estate and that he/she was duly authorized so to do.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

RACHEL BUTCHER
Notary Public - State of Florida
Commission # GG 218685
My Comm. Expires May 16, 2022
Bonded through National Notary Assn.
Print Name: Rachel Butchel
Commission No.: G-G-218685
My Commission Expires: May 10, 2023

This form is available electronically.				
	DEPARTMENT OF AGRI			
(11-25-14) Farm Service Approximation - Commodity Credit Corporation -	gency – Natural Resources Federal Crop Insurance C	Conservation Service - propration – Risk Managemer	nt Agency	
	POWER OF ATTOR		,	
THE UNDERSIGNED does hereby appoint the following	ng grantee:			
(1) LEDA NEWBERRY of the follo		1 MOT PEY TON	S Q	
SEFFNER , FL in the county of: (3)	HILLSBOUR	2011	in the State of	
	ne attorney -in-fact for (5)	PATSY MARS		
(insert grantor's name) in connection with the Farm Service A	gency, Natural Resources C	Conservation Service Agency	, or Commodity Credit Corporation	
programs checked below. NOTE: This power of attorney for A. FSA, NRCS and CCC PROGRAMS			FSA, NRCS, and CCC PROGRAMS	
(Check applicable programs)			k applicable actions)	
☐ 1. All current programs ☐ 10. Mar	keting Assistance Loans	1. All actions.		
	Loan Deficiency Payments	D 2 Similar amplications a	arraneouts, and apatrages	
	gin Protection Program for ry Producers (MPP/Dairy)	2. Signing applications, a	greements, and contracts.	
☐ 3 Agricultural Risk Coverage/Price Loss ☐ 12. Fara	n Storage Facility Loan	☐ 3. Making reports.		
	gram servation Reserve Program	M 4 Conduction all manifest	ing againtange loop and I DD	
4. Biomass Crop Assistance Program (BCAP). 13. Con (CR		4. Conducting all market transactions.	ing assistance toan and LDP	
☐ 5. Tree Assistance Program (TAP). ☐ 14. NR	CS Conservation Programs.	5. AGI Certification.		
☐ 6. Livestock Indemnity Program (LIP). ☐ 15. Eme	ergency Conservation	6. Routing Banking Acco	ounts.	
	gram (ECP). ergency Forest Restoration	[7] 7 Od (S		
	ram (EFRP).	7. Other (Specify)		
8. Emergency Assistance for Livestock				
Honey Bees, and Farm-Raised Fish (ELAP).				
 9. Noninsured Crop Disaster Assistance Program (NAP). 				
(INIT).				
This form may also be used to grant authority to an attorney-in-fa	ct to act on the grantor's be	half with respect to FCIC cror	insurance policies. Checking any of the	
FCIC transactions does not have any impact as to the FSA, NRCS	or CCC transactions check	ed above:		
C. INSURED CROPS/STATE/COUNTY (Enter "All" or specify each crop, state, county and year(s)) Check applicable actions)				
	☐ 1. All actions.	` ',	•	
1.	1. All actions.	السلاء	5. Making transfers and cancellations.	
2.	2. Making application	ns for insurance.	5. Making contract changes.	
3	☐ 3. Reporting crop acr	eage and	7 Other Chariful	
3	production reports	1	7. Other (Specify):	
4.	4. Reporting a notice			
This Power of Attorney is valid in all counties in the United States unless otherw	loss and making c		until(1) written notice of its revocation has been	
duly served upon FSA, NRCS or CCC as appropriate, (2) death of the undersign	ned grantor; or (3) incompetence or	incapacitation of the undersigned gr	antor. The undersigned grantor shall provide	
separate written notice of revocation to the applicable crop insurance agent. Th AUTHORIZED SIGNATURES	is power of attorney shall not be ef	tective until properly executed and s	erved to a USDA Service Center.	
6A, Signature of Grantor (Individual)	6B. Signature Date (MM	DD-YYYYI	6C. For Grantor's Signature	
Sotte I What I			Continuation, check here if	
July J. Il Wishall	11-10	1-2018	FSA-211A is attached.	
7A. Signature of Grantor (Partnership, Corporation,	7B. Title/Relationship of	f Individual Signing in	7C. Signature Date (MM-DD-YYYY)	
Trust, etc.) (By)	the Representative		- · · · · · · · · · · · · · · · · · · ·	
8. Notary Public (this form shall be acknowledged by a notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed).				
Signature (a) the state of	(b)	the County of (c)		
FOR FSA USE ONLY		LA DE VANUE	100 Oct -1 B - 1:	
9A. Witness Signature (FSA Employee Only)	9B. Signature Date (M.		9C. Official Position	
Marison Marison		1-19-2018	I I I I I I I I I I I I I I I I I I I	
10. This power of attorney was served to (a) Coung. A County USDA Service Center,				
State of (b) Fundame effective the	nis (c) 19 th	day of (d) NOV	, (e) 2018	
NOTE: The following stalement is made in accordance with the Privacy Act of 1974 (6 USC 5)	2a - se amandadi. The authority for rocus	ellog the information identified on this form to	CER Part 749 the Commodity Codif Commodian Charles And	

The following statement is made in accordance with the Privacy Act of 1974 (6 USC 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 718, the Commodity Credit Corporation Chairer Act (18 U.S.C. 714 et seq.), the Federal Crop insurance Act (7 U.S.C. 1501 et seq.), the Food. Conservation, and Energy Act of 2008 (Pub. 1. 110-246), and the Agricultural Act of 2014 (Pub. 1. 113-79). The information will be used to enable a producer (granter) to epoch in a Individual/organization to serve as an attorney/in-fact (grantee) that is authorized to on behalf of the producer, conduct business with USDA concerning Ferm Service Agency, Natural Resources Conservation Service, Commodity Credit Corporation, and Risk Management Agency expression and may be disclosed to other Federal Organization, State, Local government appendes, Tribal egencies, and nongovernmental antilias that have been authorized access to the Information by statute or regulation and/or as described in applicable Routine Uses Identified in the System of Records Notice for USDA/FSA-2, Ferm Records File (Automatedy, USDA/MISS-1, Landovarer, Operator, Producer, Cooperator, or Participant Files, and USDA/FCIC-10, Policyholder Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of producer ineligibility to participate in and receive benefits under Farm Service Agency, Natural Resources Conservation Service, Commodity Credit Corporation, Pederal Crop Insurance Corporation, and Risk Management Agency programs.

management Agency programs.

This information collection PSA commodity and conservation programs in Titles I and II of the Agricultural Act of 2014 (Pub. L. 113-79) are exempt from the Peperwork Reduction Act (PRA) as specified in the Agricultural Act of 2014, Title
1, Subtitle P, Administration, and Title II, Subtitle G, Funding Administration. For the EFRP, this information collection is exempted from the PRA, as specified in the Fiscal Year 2010 Supplemental Appropriations Act (Public L. 111-212). For
the FSFL, this information collection is exempted from the PRA as it is required for the administration of the Food, Conservation, and Energy Act of 2008 (see Pub. L. 110-246, Title I, Subtitle F-Administration).

For those FSA, CCC, and NRCS programs that are not exempt from PRA, FSA may not conduct or sponsor, and a person is not required to asspond to a collection of information unless this collection of information has a valid OMB control number, which is 0560-0190 for this information collection, and the average time required to complete this information collection is 16 minutes per response. RETURN THIS COMPLETED FORM TO THE APPLICABLE USDA SERVICE

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PO Box 160 Live Oak FL 32064 Account Number 814100
Amount Due if paid by 01/16/2025 \$53.00
Total Due if paid after 01/16/2025 \$58.00
BILL IS DUE UPON RECEIPT

Check this box and complete reverse side to update your contact information

Kelonia Keloni

1959 0 MB 0.622 EMMA WHITFIELD C/O PATSY MARSHALL 6809 PEYTON DR SEFFNER FL 33584-2540

5 1959 C-12 SUWANNEE VALLEY ELECTRIC COOPERATIVE PO BOX 2000 7
LAKE CITY FL 32056-2000



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Kyle Keen, Tax Collector

NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS 2024 REAL ESTATE

Proudly Serving The People Of Columbia County 135 NE Hernando Ave, Suite 125 Lake City, Florida 32055-4006

Fortortax Vear 202

Account#: R01778-000

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29-28-16 6200/6200 30.0 acres 32 AC SQUARE IN NE COR OF NE1/4, EX 2 AC IN NE COR. WD 220-301,

WHITFIELD EMMA ESTATE 6809 PEYTON DR SEFFNER FL 33584



Pay	online at www.columbiataxco AMOUNT DUE	ollector.com
l am p o	aying the following amount (check only in the date paid online, in the office or p	y one box) based postmarked:
Decei	mber 30, 2024 (4% discount) mber 31, 2024 (3% discount) ary 31, 2025 (2% discount)	\$280.11 \$283.03 \$285.94
	iary 28, 2025 (1% discount) n 31, 2025 (no discount)	\$288.86 \$291.78

Please Pay in U.S. Funds to Kyle Keen, Tax Collector 135 NE Hernando Ave., Suite 125, Lake City, FL 32055

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151 **LEDA MARIA NEWBERRY** 6809 PEYTON DR 63-1482/670 SEFFNER, FL 33584 Bank America's Most Convenient Bank®