

7851 NW 110 AVE.

QUIT CLAIM DEED

Return to: (enclose self-addressed stamped envelope)
Name: Robert A. Watson
Address: 7851 NW 110 Ave
Chiefland FL 32626
This Instrument Prepared by:
Name: Robert Watson
Address: 7851 NW 110 Ave
Chiefland FL 32626
Property Appraisers Parcel Identification: 0101500300
Folio Number(s):

(SPACE ABOVE THIS LINE FOR PROCESSING DATA)

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This Quit Claim Deed, Made the 12 day of APRIL, 2021, by
ROYANNA WATSON
first party, to ROBERT ANSLEY WATSON
whose post office address is 7851 NW 110 AVE CHIEFLAND FL 32626,
second party.

(Wherever used herein the terms "first party" and "second party" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth, That the first party, for and in consideration of the sum of \$ 0 GIFT

in hand paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release, and quit claim unto the second party forever, all the right, title, interest, claim and demand which the said first party has in and to the following described lot, piece or parcel of land, situate, lying and being in the County of LEVY, State of FLORIDA, to-wit:

THE WEST 1/2 OF SW 1/4 OF NW 1/4 OF NW 1/4 OF SECTION 18, TOWNSHIP 12 SOUTH, RANG 14 EAST, LEVY COUNTY, FLORIDA. LESS THE WEST 25 FEET THEREOF CONVEYED TO LEVY COUNTY FOR ROAD RIGHT OF WAY.

To Have and to Hold, The same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said first party, either in law or equity to the only proper use, benefit and behoof of the said second party forever.

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 the presence of:

Melissa Allen
Witness Signature (as to first Grantor)
Melissa Allen
Printed Name
Melinda Baus
Witness Signature (as to first Grantor)
Melinda Baus
Printed Name

Royanna Watson
Grantor Signature
Royanna Watson
Printed Name
1190 NW 120 St
Post Office Address
Chiefland FL 32626

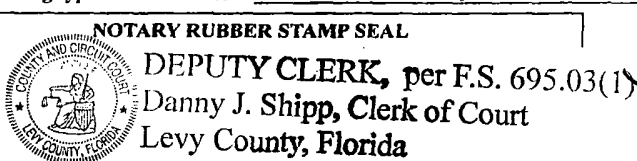
Witness Signature (as to Co-Grantor, if any)
Printed Name
Witness Signature (as to Co-Grantor, if any)
Printed Name

Co-Grantor Signature, (if any)
Printed Name
Post Office Address

STATE OF Florida
COUNTY OF Levy

I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared Royanna Watson

known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that she executed the same, and an oath was not taken. (Check one:) Said person(s) is/are personally known to me. Said person(s) provided the following type of identification: FLDC EXP 7-23-22



Witness my hand and official seal in the County and State last aforesaid this 12 day of April, 2021
Melissa Allen
Notary Signature
Melissa Allen
Printed Name