



**339 SIXTH AVENUE, SUITE 1400
PITTSBURGH, PA 15222
Phone: (412) 391-5555 Fax: (412) 391-7608
E-mail: TitleExpress@grantstreet.com**

www.GrantStreet.com

PROPERTY INFORMATION REPORT

ORDER DATE: 10/12/2018

REPORT EFFECTIVE DATE: 20 YEARS UP TO 10/11/2018

CERTIFICATE # 2015-13062

ACCOUNT # 504116010860

ALTERNATE KEY # 455597

TAX DEED APPLICATION # 42188

COUNTY, STATE: BROWARD, FL

At the request of the County Tax Collector for the above-named county, a search has been made of the Public Records for the following described property:

LEGAL DESCRIPTION:

Lot 22, Block D, PARK CITY SECTION ONE, a subdivision according to the plat or map thereof described in Plat Book 49, at Page 11, of the Public Records of BROWARD County, Florida

PROPERTY ADDRESS: 8581 SW 16 COURT, DAVIE FL 33324-4517

OWNER OF RECORD ON CURRENT TAX ROLL:

EILEEN MARTINEZ

5800 SW 19 ST

PLANTATION, FL 33317-5919

APPARENT TITLE HOLDER & ADDRESS OF RECORD:

EILEEN MARTINEZ

Instrument: 114041375

5800 SW 19 STREET

PLANTATION, FL 33317 (Per Deed)

EILEEN MARTINEZ

8581 SW 16 CT

DAVIE, FL 33324 (Per Property Appraiser)

RUBEN MARTINEZ

OR: 34845, Page: 521

8581 SW 16 COURT

DAVIE, FL 33324 (Per Deed)

(Unable to locate a Death Certificate or conveyance of record in Broward County from Ruben Martinez releasing his interest in this property.)

MORTGAGE HOLDER OF RECORD:

None found.

LIENHOLDERS AND OTHER INTERESTED PARTIES OF RECORD:

MIKON FINANCIAL SERVICES, INC AND OCEAN BANK

780 NW 42 AVE #300

MIAMI, FL 33126 (Tax Deed Applicant)

INTERNAL REVENUE SERVICE

OR: 46959, Page: 1426

COLLECTION ADVISORY GROUP
7850 SW 6TH CT MS 5780
PLANTATION, FL 33324 (Per Tax Lien)

BROWARD COUNTY
CLERK OF THE CIRCUIT COURT
(Per Order. No image or address included per county's request.)

OR: 49092, Page: 1030

CITY OF SUNRISE
10770 WEST OAKLAND PARK BOULEVARD
SUNRISE, FL 33351 (Per Lien)

OR: 50028, Page: 665

STATE OF FLORIDA
DEPARTMENT OF REVENUE
CORAL SPRINGS SERVICE CENTER
3301 N UNIVERSITY DR STE 200
CORAL SPRINGS, FL 33065-4149 (Per Tax Warrant)

OR: 49436, Page: 526

CITY OF PLANTATION
SPECIAL MAGISTRATE
400 NW 73RD AVENUE
PLANTATION, FL 33317 (Per Liens)

Instrument: 113913336
Instrument: 114800364

CITY OF PLANTATION
CODE ENFORCEMENT OFFICE
451 NW 70TH TERRACE
PLANTATION, FL 33317 (Per Liens 113913336 and 114800364.)

JULIA M NEAL, REGISTERED AGENT
O/B/O PARK CITY MOBILE HOME ESTATES, INC.
8640 SW 20TH ST
FT LAUDERDALE, FL 33324 (Per Sunbiz. Declaration recorded in 1479-552.)

JULIA NEAL, REGISTERED AGENT
O/B/O PARK CITY MANAGEMENT CORP.
8640 S W 20TH ST
FT LAUDERDALE, FL 33324
(Per Sunbiz. Declaration recorded 1479-552. Management Corp.)

PROPERTY INFORMATION REPORT – CONTINUED

PARCEL IDENTIFICATION NUMBER: 5041 16 01 0860

CURRENT ASSESSED VALUE: \$40,590

HOMESTEAD EXEMPTION: No

MOBILE HOME ON PROPERTY: Yes

OUTSTANDING CERTIFICATES: N/A

OPEN BANKRUPTCY FILINGS FOUND? No

OTHER INSTRUMENTS ASSOCIATED WITH PROPERTY BUT NO NOTICE REQUIRED:

Warranty Deed	OR: 26865, Page: 202
Quit Claim Deed	OR: 27568, Page: 216
Warranty Deed	OR: 31564, Page: 1594
Warranty Deed	OR: 34522, Page: 1578

This is a Property Information Report that has been prepared in accordance with the requirements of Sections 197.502(4) and (5), Florida Statutes, and which satisfies the minimum standards set forth in the Florida Administrative Code, Chapter 12D-13.016. This report is not title insurance. It is not an opinion of title, title insurance policy, warranty of title or any other assurance as to the status of title, and shall not be used for the purpose of issuing title insurance.

Pursuant to s. 627.7843, Florida Statutes, the maximum liability of the issuer of this property information report for errors or omissions in this property information report is limited to the amount paid for this property information report, and is further limited to the person(s) expressly identified by name in the property information report as the recipient(s) of the property information report.

Christina Young

Title Examiner



Site Address	8581 SW 16 COURT, DAVIE FL 33324-4517	ID #	5041 16 01 0860
Property Owner	MARTINEZ,EILEEN	Millage	2412
Mailing Address	8581 SW 16 CT DAVIE FL 33324	Use	02
Abbr Legal Description	PARK CITY SEC ONE 49-11 B LOT 22 BLK D		

The just values displayed below were set in compliance with **Sec. 193.011**, Fla. Stat., and include a reduction for costs of sale and other adjustments required by **Sec. 193.011(8)**.

Property Assessment Values					
Year	Land	Building / Improvement	Just / Market Value	Assessed / SOH Value	Tax
2019	\$22,050	\$19,290	\$41,340	\$41,340	
2018	\$22,050	\$19,290	\$41,340	\$41,340	
2017	\$22,050	\$18,540	\$40,590	\$40,590	\$1,028.75

2019 Exemptions and Taxable Values by Taxing Authority				
	County	School Board	Municipal	Independent
Just Value	\$41,340	\$41,340	\$41,340	\$41,340
Portability	0	0	0	0
Assessed/SOH	\$41,340	\$41,340	\$41,340	\$41,340
Homestead	0	0	0	0
Add. Homestead	0	0	0	0
Wid/Vet/Dis	0	0	0	0
Senior	0	0	0	0
Exempt Type	0	0	0	0
Taxable	\$41,340	\$41,340	\$41,340	\$41,340

Sales History			
Date	Type	Price	Book/Page or CIN
11/14/2016	QCD-T	\$100	114041375
3/25/2003	WD	\$42,000	34845 / 521
12/18/2002	WD	\$100	34522 / 1578
5/4/2001	WD	\$37,900	31564 / 1594
12/8/1997	QCD	\$100	27568 / 216

Land Calculations		
Price	Factor	Type
\$7.50	2,940	SF
Adj. Bldg. S.F. (Card, Sketch)		798
Units		1
Eff./Act. Year Built: 1963/1963		

Special Assessments								
Fire	Garb	Light	Drain	Impr	Safe	Storm	Clean	Misc
24			B					
R			B					
1								

**Board of County Commissioners, Broward County, Florida
Records, Taxes, & Treasury**

CERTIFICATE OF MAILING NOTICES

Tax Deed #42188

**STATE OF FLORIDA
COUNTY OF BROWARD**

THIS IS TO CERTIFY that I, County Administrator in and for Broward County, Florida, did on the 1st day of February 2019, mail a copy of the Notice of Application for Tax Deed to the following persons prior to the sale of property, and that payment has been made for all outstanding Tax Certificates or, if the Certificate is held by the County, that all appropriate fees have been paid and deposited:

TOWN OF DAVIE 6591 ORANGE DR DAVIE, FL 33314	MARTINEZ,EILEEN 8581 SW 16 CT DAVIE, FL 33324	EILEEN MARTINEZ 5800 SW 19 STREET PLANTATION, FL 33317	MARTINEZ,RUBEN 5800 SW 19 ST PLANTATION, FL 33317-5919
RUBEN MARTINEZ 8581 SW 16 COURT DAVIE, FL 33324	JULIA M NEAL, REGISTERED AGENT O/B/O PARK CITY MOBILE HOME ESTATES, INC. 8640 SW 20TH ST FT LAUDERDALE, FL 33324	JULIA NEAL, REGISTERED AGENT O/B/O PARK CITY MANAGEMENT CORP. 8640 S W 20TH ST FT LAUDERDALE, FL 33324	FLORIDA DEPARTMENT OF REVENUE ATTN DEKISHA CRAWFORD- SCM 3301 N UNIVERSITY DR #200 CORAL SPRINGS, FL 33065
INTERNAL REVENUE SERVICE, COLLECTION ADVISORY GROUP 7850 SW 6TH CT MS 5780 PLANTATION, FL 33324	CITY OF SUNRISE 10770 WEST OAKLAND PARK BOULEVARD SUNRISE, FL 33351	CITY OF PLANTATION, CODE ENFORCEMENT OFFICE 451 NW 70TH TERRACE PLANTATION, FL 33317	CITY OF PLANTATION, SPECIAL MAGISTRATE 400 NW 73RD AVENUE PLANTATION, FL 33317
BROWARD COUNTY, CLERK OF THE CIRCUIT COURT P.O. BOX 14610 FORT LAUDERDALE, FL 33302- 4610			

THE FOLLOWING AGENCIES WERE NOTIFIED BY INTEROFFICE

BROWARD COUNTY CODE ENFORCEMENT, PERMITTING LICENSING & PROTECTION DIVISION GCW-1 NORTH UNIVERSITY DR PLANTATION, FL 33324	BROWARD COUNTY CODE & ZONING ENFORCEMENT SECTION PLANNING & REDEVELOPEMENT DIV. ENVIRONMENTAL PROTECTION & GROWTH MGMT DEPT GCW – 1 NORTH UNIVERSITY DR MAILBOX 302 PLANTATION, FL 33324	BROWARD COUNTY HIGHWAY CONSTRUCTION & ENGINEERING DIVISION; RIGHT OF WAY SECTION ONE N. UNIVERSITY DR., STE 300 B PLANTATION, FL 33324
BROWARD COUNTY WATER & WASTEWATER 2555 W. COPANS RD POMPANO BEACH, FL 33069	PUBLIC WORKS DEPT REAL PROPERTY GOVERNMENTAL CENTER, RM 326, 115 S. ANDREWS AVE FT. LAUDERDALE, FL 33301	BROWARD COUNTY SHERIFF'S DEPT. ATTN: CIVIL DIVISION FT. LAUDERDALE, FL 33315

I certify that notice was provided pursuant to Florida Statutes, Section 197.502(4)

I further certify that I enclosed with every copy mailed, a statement as follows: 'Warning - property in which you are interested' is listed in the copy of the enclosed notice.

GIVEN UNDER MY HAND AND OFFICIAL SEAL, this 1st day of February 2019 in compliance with section 197.522 Florida Statutes, 1995, as amended by Chapter 95-147 Senate Bill No. 596, Laws of Florida 1995.

SEAL

Bertha Henry
COUNTY ADMINISTRATOR
Finance and Administrative Services Department
Records, Taxes, & Treasury Division

By _____
Deputy **Juliette M. Aikman**

Broward County, Florida

RECORDS, TAXES & TREASURY DIVISION/TAX DEED SECTION

NOTICE OF APPLICATION FOR TAX DEED NUMBER 42188

NOTICE is hereby given that the holder of the following certificate has filed said certificate for a tax deed to be issued thereon. The certificate number and year of issuance, the description of the property, and the name in which it was assessed are as follows:

Property ID: 504116-01-0860
Certificate Number: 13062
Date of Issuance: 05/26/2016
Certificate Holder: MIKON FINANCIAL SERVICES, INC AND OCEAN BANK
Description of Property: PARK CITY SEC ONE 49-11 B
LOT 22 BLK D

Name in which assessed: MARTINEZ,EILEEN
Legal Titleholders: MARTINEZ,EILEEN
8581 SW 16 CT
DAVIE, FL 33324

All of said property being in the County of Broward, State of Florida.

Unless such certificate shall be redeemed according to law the property described in such certificate will be sold to the highest bidder on the 20th day of March, 2019. Pre-bidding shall open at 9:00 AM EDT, sale shall commence at 10:00 AM EDT and shall begin closing at 11:01 AM EDT at:

broward.deedauktion.net
**Pre-registration is required to bid.*

Dated this 14th day of February, 2019.

Bertha Henry
County Administrator
RECORDS, TAXES, AND TREASURY DIVISION

By:  _____

Dana F. Buker
Deputy

This Tax Deed is Subject to All Existing Public Purpose Utility and Government Easements. The successful bidder is responsible to pay any outstanding taxes.

Publish: DAILY BUSINESS REVIEW
Issues: 02/14/2019, 02/21/2019, 02/28/2019 & 03/07/2019
Minimum Bid: 4610.22

BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
RECORDS, TAXES AND TREASURY DIVISION/TAX DEED SECTION
PROPERTY ID # 504116-01-0860 (TD #42188)

RECEIVED SHERIFF
2019 FEB -6 AM 9:36
BROWARD COUNTY, FLORIDA

WARNING

PROPERTY IN WHICH YOU ARE INTERESTED IS LISTED IN THE ENCLOSED NOTICE

BROWARD COUNTY SHERIFF'S DEPT
ATTN: CIVIL DIVISION
FT LAUDERDALE, FL 33312

NOTE

AS PER FLORIDA STATUTES 197.542, THIS PROPERTY IS BEING SCHEDULED FOR TAX DEED AUCTION, AND WILL NO LONGER BE ABLE TO BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW PLEASE CALL FOR MORE INFORMATION.

FLA. STATUTES MAY REQUIRE US TO NOTIFY ALL PROPERTY OWNERS WHO LIVE AROUND THE PROPERTY SCHEDULED FOR SALE. IF YOU DO NOT OWN OR HAVE LEGAL INTEREST IN THIS PROPERTY, PLEASE DISREGARD THIS LETTER.

PAYMENT MUST BE MADE IN CASH, MONEY ORDER OR CASHIER'S CHECK; PERSONAL OR BUSINESS CHECKS ARE NOT ACCEPTED.

AMOUNT NECESSARY TO REDEEM: (See amounts below)

MAKE CHECKS PAYABLE TO: BROWARD COUNTY TAX COLLECTOR

* Amount due if paid by February 28, 2019\$4,555.46

Or

* Amount due if paid by March 19, 2019\$4,610.22

*AMOUNTS DUE MAY BE SUBJECT TO ADDITIONAL FEES. PLEASE CALL (954) 357-5374 FOR THE CORRECT AMOUNT DUE PRIOR TO SUBMITTING PAYMENT FOR REDEMPTION.

THERE ARE UNPAID TAXES ON THIS PROPERTY AND WILL BE SOLD AT PUBLIC AUCTION ON March 20, 2019 UNLESS THE BACK TAXES ARE PAID.

TO MAKE PAYMENT, OR TO RECEIVE FURTHER INFORMATION, CONTACT THE RECORD, TAXES & TREASURY DIVISION, TAX DEED SECTION, 115 S. ANDREWS AVENUE ROOM #A-100, FORT LAUDERDALE, FLORIDA 33301-1895. PHONE: (954) 357-5374 OR 5395

FOR TAX DEEDS PROCESS AND AUCTION RULES, PLEASE VISIT

www.broward.org/recordstaxestreasury

PLEASE SERVE THIS ADDRESS OR LOCATION

**MARTINEZ,EILEEN
8581 SW 16 CT
DAVIE, FL 33324**

NOTE: THIS IS THE ADDRESS OF THE PROPERTY SCHEDULED FOR AUCTION

WAIVER OF FIRST OPTION

RECITALS:

A. Park City Mobile Home Estates, Inc., a Florida Corporation, ("Park") has by virtue of the following documents recorded among the Public Records of Broward County, Florida reserved to itself a right of first option to purchase parcels of property in the mobile home park known as Park City:

*Declaration of Covenants and Restrictions recorded in:

- O.R. Book 1479, Page 552
- O.R. Book 2604, Page 145
- O.R. Book 3669, Page 221

*Instruments recorded in:

- O.R. Book 5294, Page 191
- O.R. Book 5818, Page 778

B. Application has been made to Park to formally waive its right of first option regarding the sale and purchase of:

Lot 0, Block 22, Park City Section 1, according to the Plat thereof, recorded in Plat Book 10, Page 11, of the Public Records of Broward County, Florida.

C. Park wishes to waive its right of first option to purchase the property described in Recital B above and specifically consents to said purchase and sale.

NOW THEREFORE, for value received, Park does hereby waive its right of first option to purchase the above described property and does specifically consent to the sale of same

BY: Rose Rossetti
TO: William and Alba Hulskamper

However, it should be clearly understood that this waiver and consent does not apply to any subsequent resale.

IN WITNESS WHEREOF, Park has hereunto set its hand and seal this 2nd day of July, 1997.

WITNESSES:

[Signature]
[Signature]

PARK CITY MOBILE ESTATES, INC.

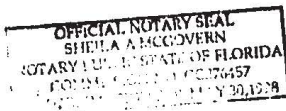
By: [Signature]
Gerald L. Schultz - Vice President

STATE OF FLORIDA)
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 2nd day of July, 1997, by Gerald Schultz of Park City Mobile Home Estates, Inc., a Florida Corporation, on behalf of the corporation.

My Commission Expires:

[Signature]
NOTARY PUBLIC



RECORDED IN THE OFFICIAL RECORDS BOOK OF BROWARD COUNTY, FLORIDA COUNTY ADMINISTRATOR

BK 26865PG0203

Exhibit



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /

Detail by Entity Name

Florida Profit Corporation
PARK CITY MOBILE HOME ESTATES, INC.

Filing Information

Document Number 446011
FEI/EIN Number 59-0941316
Date Filed 02/07/1974
State FL
Status ACTIVE

Principal Address

8640 S.W. 20TH STREET
FT. LAUDERDALE, FL 33324-5229

Mailing Address

8640 S.W. 20TH STREET
FT. LAUDERDALE, FL 33324-5229

Registered Agent Name & Address

NEAL, JULIA M
8640 SW 20TH ST
FT LAUDERDALE, FL 33324

Name Changed: 02/03/2012

Address Changed: 02/17/1993

Officer/Director Detail

Name & Address

Title PD

NEAL, JULIA M
8640 S.W. 20TH STREET
DAVIE, FL 33324

Title TD

PHILLIPS, JOAN
8640 S.W. 20TH STREET
DAVIE, FL 33324

Title SD

SCHULTZ, GERALD JR
 8640 S.W. 20TH STREET
 DAVIE, FL 33324

Title VPD

SCHULTZ, GERALD JR
 8640 S.W. 20TH STREET
 DAVIE, FL 33324

Annual Reports

Report Year	Filed Date
2016	02/19/2016
2017	04/25/2017
2018	01/25/2018

Document Images

01/25/2018 -- ANNUAL REPORT	View image in PDF format
04/25/2017 -- ANNUAL REPORT	View image in PDF format
02/19/2016 -- ANNUAL REPORT	View image in PDF format
01/29/2015 -- ANNUAL REPORT	View image in PDF format
01/23/2014 -- ANNUAL REPORT	View image in PDF format
01/30/2013 -- ANNUAL REPORT	View image in PDF format
02/03/2012 -- ANNUAL REPORT	View image in PDF format
01/27/2011 -- ANNUAL REPORT	View image in PDF format
01/12/2010 -- ANNUAL REPORT	View image in PDF format
03/20/2009 -- ANNUAL REPORT	View image in PDF format
01/28/2008 -- ANNUAL REPORT	View image in PDF format
01/08/2007 -- ANNUAL REPORT	View image in PDF format
01/13/2006 -- ANNUAL REPORT	View image in PDF format
02/16/2005 -- ANNUAL REPORT	View image in PDF format
01/28/2004 -- ANNUAL REPORT	View image in PDF format
01/14/2003 -- ANNUAL REPORT	View image in PDF format
02/17/2002 -- ANNUAL REPORT	View image in PDF format
03/01/2001 -- ANNUAL REPORT	View image in PDF format
03/06/2000 -- ANNUAL REPORT	View image in PDF format
01/22/1999 -- ANNUAL REPORT	View image in PDF format
01/15/1998 -- ANNUAL REPORT	View image in PDF format
01/22/1997 -- ANNUAL REPORT	View image in PDF format
02/13/1996 -- ANNUAL REPORT	View image in PDF format
02/07/1995 -- ANNUAL REPORT	View image in PDF format



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /

Detail by Entity Name

Florida Profit Corporation
PARK CITY MANAGEMENT CORP

Filing Information

Document Number 218615
FEI/EIN Number 59-0872503
Date Filed 05/17/1957
State FL
Status ACTIVE

Principal Address

8640 SW 20TH STREET
FORT LAUDERDALE, FL 33324

Changed: 03/01/2001

Mailing Address

8640 SW 20TH STREET
FORT LAUDERDALE, FL 33324

Changed: 03/01/2001

Registered Agent Name & Address

NEAL, JULIA
8640 S W 20TH ST
FT LAUDERDALE, FL 33324

Name Changed: 03/06/2000

Address Changed: 02/17/1993

Officer/Director Detail

Name & Address

Title VP

NEAL, JULIA M
8640 SW 20TH ST
DAVIE, FL 33324

Title TD

PHILLIPS. JOAN

8640 S.W. 20TH STREET
DAVIE, FL 33324

Title PD

SCHULTZ, JR, GERALD L
8640 SW 20TH ST
DAVIE, FL 33324

Title Secretary

Neal, Julia M
8640 SW 20TH ST.
DAVIE, FL 33324

Title Asst. Secretary

Swart, Ann
8640 SW 20th St.
Davie, FL 33324

Annual Reports

Report Year	Filed Date
2016	02/19/2016
2017	04/25/2017
2018	01/25/2018

Document Images

01/25/2018 -- ANNUAL REPORT	View image in PDF format
04/25/2017 -- ANNUAL REPORT	View image in PDF format
02/19/2016 -- ANNUAL REPORT	View image in PDF format
01/29/2015 -- ANNUAL REPORT	View image in PDF format
01/23/2014 -- ANNUAL REPORT	View image in PDF format
01/30/2013 -- ANNUAL REPORT	View image in PDF format
02/03/2012 -- ANNUAL REPORT	View image in PDF format
01/27/2011 -- ANNUAL REPORT	View image in PDF format
01/12/2010 -- ANNUAL REPORT	View image in PDF format
01/19/2009 -- ANNUAL REPORT	View image in PDF format
01/28/2008 -- ANNUAL REPORT	View image in PDF format
01/08/2007 -- ANNUAL REPORT	View image in PDF format
01/13/2006 -- ANNUAL REPORT	View image in PDF format
02/16/2005 -- ANNUAL REPORT	View image in PDF format
01/28/2004 -- ANNUAL REPORT	View image in PDF format
01/14/2003 -- ANNUAL REPORT	View image in PDF format
02/17/2002 -- ANNUAL REPORT	View image in PDF format
03/01/2001 -- ANNUAL REPORT	View image in PDF format
03/06/2000 -- ANNUAL REPORT	View image in PDF format
01/22/1999 -- ANNUAL REPORT	View image in PDF format
01/16/1998 -- ANNUAL REPORT	View image in PDF format

01/22/1997 -- ANNUAL REPORT	View image in PDF format
02/13/1996 -- ANNUAL REPORT	View image in PDF format
02/10/1995 -- ANNUAL REPORT	View image in PDF format

Florida Department of State, Division of Corporations

3479

Department of the Treasury - Internal Revenue Service

Form 668 (Y)(c)
(Rev. February 2004)

Notice of Federal Tax Lien

Area: SMALL BUSINESS/SELF EMPLOYED AREA #3 Serial Number 633068510
Lien Unit Phone: (800) 913-6050

For Optional Use by Recording Office

As provided by section 6321, 6322, and 6323 of the Internal Revenue Code, we are giving a notice that taxes (including interest and penalties) have been assessed against the following-named taxpayer. We have made a demand for payment of this liability, but it remains unpaid. Therefore, there is a lien in favor of the United States on all property and rights to property belonging to this taxpayer for the amount of these taxes, and additional penalties, interest, and costs that may accrue.

Name of Taxpayer RUBEN MARTINEZ

Residence 8581 SW 16TH CT
DAVIE, FL 33324-4517

IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refiled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).

Kind of Tax (a)	Tax Period Ending (b)	Identifying Number (c)	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)
1040	12/31/2001	XXX-XX- XXXXXXXXXX	08/09/2004	09/08/2014	2888.26

Place of Filing County Courthouse
Broward County
Ft. Lauderdale, FL 33301

Total \$ 2888.26

This notice was prepared and signed at BALTIMORE, MD, on this, the 10th day of March, 2010.

Signature R. A. Mitchell Title REVENUE OFFICER 23-08-1911
for AUDRE J OWENS (954) 423-7337

(NOTE: Certificate of officer authorized by law to take acknowledgment is not essential to the validity of Notice of Federal Tax lien Rev. Rul. 71-466, 1971 - 2 C.B. 409) Part 1 - Kept By Recording Office Form 668(Y)(c) (Rev. 2-2004) CAT. NO 60025X



Florida Department of Revenue
WARRANT

MARTINEZ, EILEEN & MARTINEZ, RUBEN VASQU
5800 SW 19TH ST
PLANTATION, FL 33317-5919

Tax : Documentary Stamp Tax
Business Partner # : 3618256
Contract Object # :
FEIN :
Warrant # : 1000000450067

Re: Warrant issued under Chapter
_____ 201, Florida Statutes

THE STATE OF FLORIDA
TO ALL AND SINGULAR, THE CLERKS OF THE CIRCUIT COURTS AND
ALL AND SINGULAR, THE SHERIFFS OF THE STATE OF FLORIDA

WARRANT FOR COLLECTION OF DELINQUENT _____ Documentary Stamp Tax _____ TAX(ES).

The taxpayer named above in the County of Broward, is
indebted to the Department of Revenue, State of Florida, in the following amounts:

TAX	\$	831.60
PENALTY	\$	101.16
INTEREST	\$	234.98
TOTAL	\$	1167.74
FEE(S)	\$	20.00
GRAND TOTAL	\$	<u>1187.74</u>

For returns due on or before December 31, 1999, interest is due at the rate of 12% per annum. For returns due on or after January 1, 2000, a floating rate of interest applies in accordance with section 213.235, Florida Statutes.

WITNESS my hand and official seal in this City of Coral Springs,
Broward County, Florida, this 19th day of January, 2013.

Marshall Stranburg, Interim Executive Director
Department of Revenue, State of Florida

This instrument prepared by:

Authorized Agent



Please bill to:
State of Florida, Department of Revenue
CORAL SPRINGS SERVICE CENTER
3301 N UNIVERSITY DR STE 200
Coral Springs, FL 33065-4149

PREPARED BY:
CODE ENFORCEMENT OFFICE
CITY OF PLANTATION
451 NW 70th TERRACE
PLANTATION, FL 33317
TELEPHONE: 954-797-2267

**SPECIAL MAGISTRATE
CITY OF PLANTATION, FLORIDA**

CITY OF PLANTATION, FLORIDA

Case No: CE16-00123

Petitioner,

vs.

MARTINEZ, EILEEN H/E
MARTINEZ, RUBEN V & SARA

Respondents.

SUPPLEMENTAL ORDER/CLAIM OF LIEN

The City of Plantation, Special Magistrate, 400 NW 73rd Avenue, Plantation, Florida 33317, after due notice to the Respondents, and the Respondent, EILEEN MARTINEZ appearing at the hearing herein, and the Special Magistrate having heard testimony at the Hearing to Confirm Fine held on August 18, 2016 and based on the evidence, the Special Magistrate enters the following findings of fact and order.

1. That the Special Magistrate did issue a FINAL ORDER on March 17, 2016 on the above captioned case commanding the Respondents, MARTINEZ, EILEEN H/E MARTINEZ, RUBEN V & SARA to bring the violation of the City of Plantation, Code of Ordinances, as to SECTION 5-87 (a) (9) into compliance on or before April 16, 2016 or pay a fine in the amount of \$100.00 per day for each day of non-compliance hereafter.

Subsequently a SUPPLEMENTAL ORDER GRANTING EXTENSION OF TIME TO COME INTO COMPLIANCE was entered on the 19th day of May, 2016 granting Respondents until on or before the 18th day of July, 2016 to come into compliance.

2. That said violation occurred on the following described real property situate, lying and being in Broward County, Florida to wit:

STREET ADDRESS: 5800 SW 19 STREET, PLANTATION, FLORIDA

LEGAL DESCRIPTION FOR PROPERTY ID #5041 14 07 0030

COVE HOMESITES 66-28 B LOT 3

3. That the Respondents, MARTINEZ, EILEEN H/E MARTINEZ, RUBEN V & SARA did not comply with the Final Order on or before the date specified therein.

(2)

4. IT IS THE ORDER OF THE SPECIAL MAGISTRATE that a fine of **\$250.00** for violation of City of Plantation Code of Ordinances, SECTION 5-87 (a) (9) as specified in said Final Order is hereby confirmed and ratified, plus the recovery of reasonable attorney's fees and costs in any foreclosure of the lien.

5. The fine confirmed above shall constitute a lien against the land on which the violation exists, and upon any other real or personal property owned by the Respondents, MARTINEZ, EILEEN H/E MARTINEZ, RUBEN V & SARA in any county wherein a certified copy of this Supplemental Order/Claim of Lien is recorded.

6. If the fine is not satisfied within 90 days from the date of this Order, the City of Plantation is authorized to foreclose on all liens or to sue to recover a money judgment for the amount of those fines plus interest that have remained unpaid for three months following the date of this order.

DONE AND ORDERED ON THIS 18th day of August, 2016.



SPECIAL MAGISTRATE

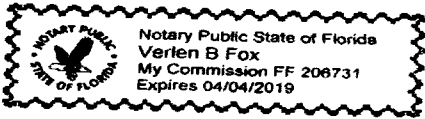
STATE OF FLORIDA)
COUNTY OF BROWARD) SS.

The foregoing instrument was SWORN TO, SUBSCRIBED, AND ACKNOWLEDGED before me on this 18th day of August, 2016 by CRAIG ROGERS, the Special Magistrate of the City of Plantation, who is personally known to me.

Verlen B. Fox
Notary Signature

Verlen B. Fox
Printed Name of Notary

Notary Stamp



RECORD ENTRY:

I HEREBY CERTIFY that the Original of the foregoing signed Order was received by the Principal Office Assistant and entered into the Case Docket (Public Record) this 19 day of August, 2016.

Debra Joy
Principal Office Assistant

CERTIFICATION
CERTIFY THIS TO BE A TRUE & CORRECT
COPY OF THE ORIGINAL DOCUMENT ON
FILE AT CITY HALL
WITNESS MY HAND AND OFFICIAL SEAL OF
THE CITY OF PLANTATION, FL THIS 19
DAY OF August, 2016
Debra R. Joy
CITY CLERK

2
PREPARED BY:
CODE ENFORCEMENT OFFICE
CITY OF PLANTATION
451 NW 70th TERRACE
PLANTATION, FL 33317
TELEPHONE: 954-797-2267

**SPECIAL MAGISTRATE
CITY OF PLANTATION, FLORIDA**

CITY OF PLANTATION, FLORIDA

Case No: CE17-01653

Petitioner,

vs.

MARTINEZ,EILEEN H/E MARTINEZ,RUBEN V & SARA

Respondent(s).

SUPPLEMENTAL ORDER/CLAIM OF LIEN

The City of Plantation, Special Magistrate, 400 NW 73rd Avenue, Plantation, Florida 33317, after due notice to the Respondent, and the Respondent having appeared, and the Special Magistrate having heard testimony at the Hearing to Confirm Fine held on October 19, 2017 and based on the evidence, the Special Magistrate enters the following findings of fact and order.

1. That the Special Magistrate did issue a Final Order on July 20, 2017 on the above captioned case commanding the Respondent, MARTINEZ,EILEEN H/E MARTINEZ,RUBEN V & SARA to bring the violation of the City of Plantation, Code of Ordinances, as to Section 5-87 (a)(9) and Section 11-8 into compliance on or before August 3, 2017 or pay a fine in the amount of \$150.00 per day per violation for each day of non-compliance hereafter.

That the Special Magistrate did issue a Final Order on July 20, 2017 on the above captioned case commanding the Respondent, MARTINEZ,EILEEN H/E MARTINEZ,RUBEN V & SARA to bring the violation of the City of Plantation, Code of Ordinances, as to Section 5-87(a)(12) and Section 5-87(a)(16) and Section 11-9 into compliance on or before August 9, 2017 or pay a fine in the amount of \$75.00 per day per violation for each day of non-compliance hereafter.

That the Special Magistrate did issue a Final Order on July 20, 2017 on the above captioned case commanding the Respondent, MARTINEZ,EILEEN H/E MARTINEZ,RUBEN V & SARA to bring the violation of the City of Plantation, Code of Ordinances, as to Section 5-87(a)(13) into compliance on or before September 3, 2017 or pay a fine in the amount of \$75.00 per day for each day of non-compliance hereafter.

2. That said violation occurred on the following described real property situate, lying and being in Broward County, Florida to wit:

STREET ADDRESS: 5800 SW 19 ST

LEGAL DESCRIPTION FOR PROPERTY ID #504114070030

COVE HOMESITES 66-28 B LOT 3

3. That the Respondent, MARTINEZ, EILEEN H/E MARTINEZ, RUBEN V & SARA did not comply with the Final Order on or before the date specified therein, however the respondent did comply violation of Section 11-8 after the compliance date given.

4. IT IS THE ORDER OF THE SPECIAL MAGISTRATE that the fine of \$150.00 per day for violation of City of Plantation Code of Ordinances, Section 5-87 (a)(9) as specified in said Final Order is hereby confirmed and ratified and shall accrue at the per diem specified until such time as the Respondent, MARTINEZ, EILEEN H/E MARTINEZ, RUBEN V & SARA shall comply with said Final Order, plus the recovery of reasonable attorney's fees and costs in any foreclosure of the lien.

IT IS THE ORDER OF THE SPECIAL MAGISTRATE that the fine of \$75.00 per day per violation for violation of City of Plantation Code of Ordinances, Section 5-87 (a)(12), Section 5-87(a)(16), Section 5-87(a)(13) and Section 11-9 as specified in said Final Order is hereby confirmed and ratified and shall accrue at the per diem specified until such time as the Respondent, MARTINEZ, EILEEN H/E MARTINEZ, RUBEN V & SARA shall comply with said Final Order, plus the recovery of reasonable attorney's fees and costs in any foreclosure of the lien.

IT IS THE ORDER OF THE SPECIAL MAGISTRATE that a flat fine of \$2,875.00 for violation of City of Plantation Code of Ordinances, Section 11-8, is hereby confirmed and ratified plus the recovery of reasonable attorney's fees and costs in any foreclosure of the lien.

5. The fine confirmed above shall constitute a lien against the land on which the violation exists, and upon any other real or personal property owned by the Respondent, MARTINEZ, EILEEN H/E MARTINEZ, RUBEN V & SARA in any county wherein a certified copy of this Supplemental Order/Claim of Lien is recorded.

6. If the fine is not satisfied within 90 days from the date of this Order, the City of Plantation is authorized to foreclose on all liens or to sue to recover a money judgment for the amount of those fines plus interest that have remained unpaid for three months following the date of this order.

DONE AND ORDERED on this 19th day of October, 2017.

CERTIFICATION

CERTIFY THIS TO BE A TRUE & CORRECT COPY OF THE ORIGINAL DOCUMENT ON FILE AT CITY HALL

WITNESS MY HAND AND OFFICIAL SEAL OF THE CITY OF PLANTATION, FL THIS 2nd

DAY OF November 20 17

[Signature]
CITY CLERK

[Signature]
SPECIAL MAGISTRATE

9A 031508 TH001
01-17-98 01:38PM

* W. 70
DOCU. STAMPS-DEED

RECVD. BROWARD CNTY

COUNTY ADMIN.

Parcel ID Number: 0116-01-0860
Grantee #1 TIN:
Grantee #2 TIN:
Grantee #3 TIN:

Quitclaim Deed

This Quitclaim Deed, Made this 8th day of December, 1997 A.D. Between
*WILLIAM G. HULSKAMPER AND ALBA M. HULSKAMPER, HIS WIFE, ALSO SOMETIMES
KNOWN AS WILLIAM HAULSCAMPER AND ALBA HAULSCAMPER,

of the County of _____, State of New Hampshire, grantor, and
WILLIAM G. HULSKAMPER and ALBA M. HULSKAMPER, his wife, AND BRUCE W.
HULSKAMPER, a married man,

whose addresses are: 125 THE VILLAGE OF GLEN FALLS
GOFFTOWN, New Hampshire 03045
and HCR82 BOX 7005, MIDDLETOWN, California 95461

of the County of _____, State of New Hampshire, grantees.

Witnesseth that the GRANTOR, for and in consideration of the sum of -----
-----TEN & NO/100 (\$10.00)-----DOLLARS,
and other good and valuable consideration to GRANTOR in hand paid by GRANTEE, the receipt whereof is hereby acknowledged, has
granted, bargained and quitclaimed to the said GRANTEE and GRANTEE'S heirs and assigns forever, the following described land,
situate, lying and being in the County of BROWARD, State of Florida, to wit:

LOT 22, BLOCK D OF PARK CITY SECTION ONE, ACCORDING TO THE PLAT
THEREOF AS RECORDED IN PLAT BOOK 49, PAGE 11 OF THE PUBLIC
RECORDS OF BROWARD COUNTY, FLORIDA.

*GRANTORS NAMES IN WARRANTY DEED RECORDED IN O.R. BOOK 26865,
PAGE 202 WAS SPELLED INCORRECTLY.

SUBJECT TO COVENANTS, RESTRICTIONS, RESERVATIONS, LIMITATIONS,
CONDITIONS, CHARGES, USES AND EASEMENTS.

It being the further intent of the Grantees,
WILLIAM G. HULSKAMPER and ALBA M. HULSKAMPER, AND Grantee,
BRUCE W. HULSKAMPER,
that they hold title as joint tenants with right of survivorship.

8K27568PG0216

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 grantor, either in law or equity, for
the use, benefit and profit of the said grantees forever.



2
AC

In Witness Whereof, the grantor has hereunto set their hand and seal the day and year first above written.
Signed, sealed and delivered in our presence:

Doreen R. Carey
Printed Name: Doreen R. Carey
Witness as to Both
Sheila McGovern
Printed Name: Sheila McGovern
Witness as to Both

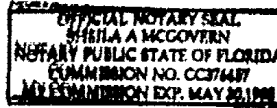
William G. Hulskamper (Seal)
WILLIAM G. HULSKAMPER
P.O. Address 125 THE VILLAGE OF GLEN FALLS, GOFFTOWN
Alba M. Hulskamper NH 03045 (Seal)
ALBA M. HULSKAMPER
P.O. Address 125 THE VILLAGE OF GLEN FALLS, GOFFTOWN, NH 03

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 16th day of Dec, 1997 by
*WILLIAM G. HULSKAMPER AND ALBA M. HULSKAMPER, HIS WIFE, ALSO
SOMETIMES KNOWN AS WILLIAM HAULSCAMPER AND ALBA HAULSCAMPER,
who are personally known to me or who have produced their _____
as identification.

This Document Prepared By:
DORJEN R. CAREY
DORJEN R. CAREY, P.A.
1020 S.W. 5TH COURT
FT. LAUDERDALE, FL. 33306

Sheila McGovern
Printed Name: _____
NOTARY PUBLIC
My Commission Expires: _____



BK27568PG0217

RECORDED IN THE OFFICIAL RECORDS BOOK
OF BROWARD COUNTY, FLORIDA
COUNTY ADMINISTRATOR

Prepared by and Return to:

209818
Kimberly A. Browne
AZTEC TITLE CORPORATION
2 S. UNIVERSITY DRIVE, SUITE 231
PLANTATION, FLORIDA 33324
SS# - GRANTEE 1:
Tax Folio Number : 0116-01-0860

INSTR # 101015557
OR BK 31564 PG 1594
RECORDED 05/07/2001 03:24 PM
COMMISSION
BROWARD COUNTY
DOC STMP-D 265.30
DEPUTY CLERK 2030

THIS WARRANTY DEED,

made the 2nd day of May, A.D. 2001

BRUCE W. HULSKAMPER, a married man, and WILLIAM G. HULSKAMPER and ALBA M. HULSKAMPER, his wife

whose address is: 1825 Coco Plum Street, NE, Palm bay, FL 32905 hereinafter called the Grantor, to,

ERIC G. ALBURY

whose address is: 8581 SW 16TH Court, Davie, FL 33324 hereinafter called Grantee,

(Wherever used herein the terms "Grantor" and "Grantee" 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 Grantor, for and in consideration of the sum of \$10 00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee all that certain land, situate in BROWARD County, State of Florida, viz:

Lot 22, Block D, PARK CITY SECTION ONE, a subdivision according to the plat or map thereof described in Plat Book 49, at page(s) 11, of the Public Records of BROWARD county, Florida.

*Grantor(s) herein warrant and covenant that the property described herein does not constitute their homestead property, nor is it contiguous thereto, under the statutes of the State of Florida. *Bruce W. Hulskamper

Together, with all tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining. To Have and to Hold, the same in fee simple forever.

And the Grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land, and hereby warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 20 00.

In Witness Whereof, the said Grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in the presence of:

(WITNESS 1) Jennifer Zepiari
PRINT OR TYPE NAME: Jennifer Zepiari

[Signature]
BRUCE W. HULSKAMPER

(WITNESS 2) Devi Anghad
PRINT OR TYPE NAME: [Signature]

SEE ATTACHED

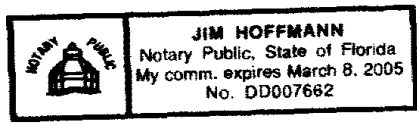
State of ~~CALIFORNIA~~ FL.
County of BROWARD.

The foregoing instrument was acknowledged before me on this 2 day of May, 2001 by BRUCE W. HULSKAMPER who is known to me or who has produced [Signature] as identification and did NOT take an oath.

My Commission Expires:

(SEAL)

[Signature]
NOTARY PUBLIC
PRINT OR TYPE NAME:



Kimberly A. Browne
WITNESS 1 KIMBERLY A. BROWNE

Alba M. Hulskamper
NAME: ALBA M. HULSKAMPER
Address: 1825 Coco Plum St. NE
Palm Bay, FL 32905

Billy F. Wadley
WITNESS 2 BILLY F. WADLEY

William G. Hulskamper
NAME: WILLIAM G. HULSKAMPER
Address: 1825 Coco Plum St. NE
Palm Bay, FL 32905

STATE OF FLORIDA

COUNTY OF BROWARD

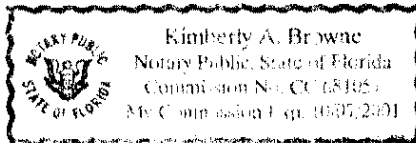
The foregoing instrument was acknowledged before me on this 4th day of May, 2001 by
WILLIAM G. HULSKAMPER and ALBA M. HULSKAMPER, HIS WIFE

who is known to me or who has produced FL D. Licenses
as identification and did take an oath.

Kimberly A. Browne
NOTARY PUBLIC

(SEAL)

Print or Type Name:
My Commission Expires:



**WAIVER OF FIRST OPTION
RECITALS:**

A. Park City Mobile Home Estates, Inc., a Florida Corporation, ("Park") has by virtue of the following documents recorded among the Public Records of Broward County, Florida reserved to itself a right of first option to purchase parcels of property in the mobile home park known as Park City:

■ Declaration of Covenants and Restrictions recorded in:

O.R. BOOK 1479, PAGE 552

O.R. BOOK 2604, PAGE 145

O.R. BOOK 3669, PAGE 221

Instruments recorded in :

O.R. BOOK 5294, PAGE 191

O.R. BOOK 5818, PAGE 778

B. Application has been made to Park to formally waive its right of first option regarding the sale and purchase of:

Lot 22, Block D, Park City Section 1
according to the Plat thereof, recorded in Plat
Book 49, Page 11, of the Public Records
of Broward County, Florida.

C. Park wishes to waive its right of first option to purchase the property described in Recital B / above and specifically consents to said purchase and sale.

NOW THEREFORE, for value received, Park does hereby waive its right of first option to purchase the above described property and does specifically consent to the sale of same

BY: William & Alba Hulskamper

TO: Eric Albury

However, it should be clearly understood that this waiver and consent does not apply to any subsequent resale.

IN WITNESS WHEREOF, Park has hereunto set its hand and seal this 30 day of April, 2001.

WITNESS:

PARK CITY MOBILE ESTATES, INC.

Sheila McGovern
SHEILA MCGOVERN

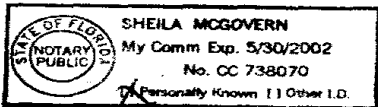
By: Gerald Schultz
Gerald Schultz, Vice President
8640 SW 20 St.
Ft. Lauderdale FL 33324

STATE OF FLORIDA)
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 30 day of April, 2001, by Gerald Schultz Vice President of Park City Mobile Home Estates, Inc., a Florida Corporation on behalf of the corporation.

My Commission Expires:

Sheila McGovern
NOTARY PUBLIC



This Instrument was prepared by:
PAUL B. STEINBERG, Esq.,
STEINBERG & ASSOCIATES, P.A.
767 Arthur Godfrey Road
Miami Beach, Florida 33140

Tax Identification No. 0116-01-0860

²¹⁰⁴¹³
AZTEC TITLE CORPORATION
w/c 2 S. University Dr. #231
#19 Plantation, FL. 33324

WARRANTY DEED

THIS WARRANTY DEED made this 18th day of December, 2002, by

ERIC GORDON ALBURY, a single man,

whose post office address is 8581 SW 16 Court, Davie, Florida, hereinafter called the Grantor(s),
to

JUDITH A. HATTON, and LACY LEE HATTON, JR., her husband

whose post office address is 2510 SW 86th Avenue, Davie, Florida, hereinafter called the
Grantee(s);

WITNESSETH: That the Grantor, for and in consideration of the sum of Ten dollars and
No/100 (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged,
hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee,
all that certain land situate in Broward County, Florida, viz:

Lot 22, Block D, PARK CITY SECTION ONE, a subdivision according to the plat or
map thereof described in Plat Book 49, at pages(s) 11, of the Public Records of
BROWARD County, Florida.

**SUBJECT TO: (1) Conditions, restrictions, easements and limitations of record; and
(2) taxes for the year 2002 and subsequent years.**

THIS IS A TRANSFER BETWEEN FAMILY MEMBERS FOR NO MONETARY
CONSIDERATION. JUDITH A. HATTON IS THE GRANTOR'S DAUGHTER AND THE
GRANTEE'S ADVANCED THE FUNDS WHEN THE GRANTOR ACQUIRED THE
PROPERTY IN 2001.

Together with all the tenements, hereditaments and appurtenances thereto belonging or
in anywise appertaining.

3
2

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2001.

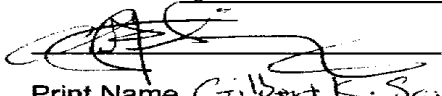
IN WITNESS WHEREOF, the grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered
in our presence:



Print Name PAUL B. STEINBERG

Eric G. Albury
ERIC GORDON ALBURY



Print Name Gilbert K. Squires

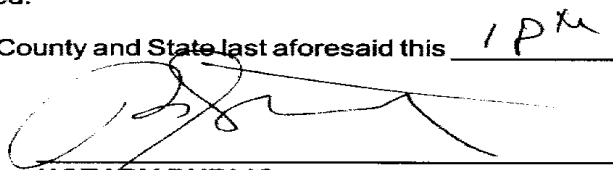
STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared **ERIC GORDON ALBURY**, who

[] is/are personally known to me
[] produced _____ as identification

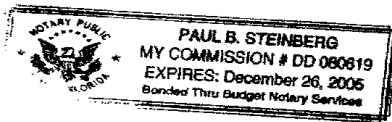
and who did execute the foregoing Warranty Deed.

WITNESS my hand and official seal in the County and State last aforesaid this 1st
day of December, 2002.



My commission expires:

NOTARY PUBLIC
State of Florida at Large
Print name: PAUL B. STEINBERG
Commission No. _____



Prepared by and Return to:

210413
AZTEC TITLE CORPORATION
2 S. UNIVERSITY DRIVE, SUITE 231
PLANTATION, FLORIDA 33324
SS# - GRANTEE 1: - -
Tax Folio Number : 504116010860

THIS WARRANTY DEED,

made the 25th day of March, A.D. 2003
JUDITH A. HATTON and LACY LEE HATTON, JR., Husband and Wife

whose address is: 2510 S.W. 86th Avenue, Davie, FL 33324
hereinafter called the Grantor, to,
RUBEN MARTINEZ and SARA MARTINEZ, his wife

whose address is: 8581 SW 16 Court, DAVIE, FL 33324
hereinafter called Grantee,

(Wherever used herein the terms "Grantor" and "Grantee" 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 Grantor, for and in consideration of the sum of \$10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee all that certain land, situate in BROWARD County, State of Florida, viz:

Lot 22, Block D, PARK CITY SECTION ONE, a subdivision according to the plat or map thereof described in Plat Book 49, at Page 11, of the Public Records of BROWARD County, Florida, Together with that certain Mobile Home which is attached thereto, and described as a 1963 VAND, BEARING IDENTIFICATION #G3V4520F2N996A & G3V4520F2N996.

Together, with all tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.
To Have and to Hold, the same in fee simple forever.

And the Grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land, and hereby warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 20 02 .

In Witness Whereof, the said Grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in the presence of:

(WITNESS 1) Kimberly A. Browne
PRINT OR TYPE NAME: KIMBERLY A. BROWNE

Judith A. Hatton
JUDITH A. HATTON

(WITNESS 2) Michele Wadley
PRINT OR TYPE NAME: MICHELE WADLEY

Lacy Lee Hatton, Jr.
LACY LEE HATTON, JR.

State of FLORIDA
County of BROWARD

The foregoing instrument was acknowledged before me on this 25th day of March, 2003 by JUDITH A. HATTON and LACY LEE HATTON, JR., Husband and Wife, who is known to me or who has produced FL Drivers License as identification and did _____ take an oath.

My Commission Expires:

(SEAL)

Kimberly A. Browne
NOTARY PUBLIC
PRINT OR TYPE NAME:



11

27

MUNICIPALITY CLAIM OF LIEN
FOR WATER, SEWER AND/OR GAS SERVICE CHARGES

STATE OF FLORIDA)
) SS
COUNTY OF BROWARD)

BEFORE ME the undersigned authority personally appeared Linda S. Maynard, who being duly sworn, says that she is the agent of the lienor, City of Sunrise, Florida, whose address is 10770 West Oakland Park Boulevard, Sunrise, Florida, 33351, and that the lienor has supplied water, sewer, and/or gas system services for the following real property:

PARK CITY SEC ONE 49-11 B LOT 22 BLK D
AKA: 8581 SW 16 CT

and for said services a bill was submitted and there currently remains unpaid on said bill the amount of \$1,671.09, plus interest, lien and satisfaction fees. Additional monthly service charges will accrue for a total balance due to be calculated at the time of payoff. In accordance with Section 159.17 Florida Statutes, the lienor, City of Sunrise, has a lien on the real property described above for all water, sewer and/or gas services provided until payment has been made for such service.

Said property is owned by Ruben and Sara Martinez, upon whom a notice of Municipality Claim of Lien was served on the 24th day of July, 2013 by certified mail.

CITY OF SUNRISE, FLORIDA
BY [Signature]
Linda S. Maynard

SWORN AND SUBSCRIBED BEFORE ME THIS
24 DAY OF July, 2013
[Signature]

Personally known OR Produced I.D.
Type and number of I.D. produced.

My Commission Expires:

DID take an oath, or DID not take an oath

 **LINA M. MONTOYA**
MY COMMISSION # EE 846321
EXPIRES: October 23, 2016
Bonded Thru Budget Notary Services

Quitclaim Deed

RECORDING REQUESTED BY EILEEN MARTINEZ

AND WHEN RECORDED MAIL TO:

EILEEN MARTINEZ, Grantee(s)
5800 SW 19 Street
Plantation, Florida 33317

Consideration: \$ 10.00

Property Transfer Tax: \$ _____

Assessor's Parcel No.: 34845/521

PREPARED BY: EILEEN MARTINEZ certifies herein that he or she has prepared this Deed.

Eileen Martinez
Signature of Preparer

11/14/16.
Date of Preparation

EILEEN MARTINEZ
Printed Name of Preparer

THIS QUITCLAIM DEED, executed on 11-14-16. in the County of Broward, State of FLORIDA.

by Grantor(s), SARA C. MARTINEZ,
whose post office address is 5800 SW 19 Street, Plantation, FL 33317.

to Grantee(s), EILEEN MARTINEZ,
whose post office address is 5800 SW 19 Street, Plantation, FL 33317.

WITNESSETH, that the said Grantor(s), SARA C. MARTINEZ,
for good consideration and for the sum of Ten Dollars

(\$ 10) paid by the said Grantee(s), the receipt whereof is hereby acknowledged,
does hereby remise, release and quitclaim unto the said Grantee(s) forever, all the right, title

NOTARY ACKNOWLEDGMENT

State of Florida

County of Broward

On 4th November 2016, before me, Deborah Hitchens, a notary public in and for said state, personally appeared, Sarah Calderon Martinez and Eileen Martinez

who are known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument.

WITNESS my hand and official seal.

Deborah Hitchens
Signature of Notary



Affiant Known _____ Produced ID ✓

Type of ID Eileen Martinez FL DL (Seal)
Sarah Calderon Martinez US PSPT

Lot 22, Block D, Park City Section 6, A subdivision according to the plat or map. Thereof described in Plat Book 49, at page 11, of the public records of BROWARD County, Florida, together with that certain Mobile Home which is attached thereto, and described as a 1963 VAN 15, BEARING IDENTIFICATION # [REDACTED] and [REDACTED]

DATE: February 1st, 2019
PROPERTY ID # 504116-01-0860 (TD # 42188)

WARNING

PROPERTY IN WHICH YOU ARE INTERESTED IS LISTED IN THE ENCLOSED NOTICE

MARTINEZ, EILEEN
8581 SW 16 CT
DAVIE, FL 33324

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MAKE CASHIER'S CHECK OR MONEY ORDER PAYABLE TO: BROWARD COUNTY TAX COLLECTOR

- * Estimated Amount due if paid by February 28, 2019\$4,555.46
- Or
- * Estimated Amount due if paid by March 19, 2019\$4,610.22

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TO MAKE PAYMENT, OR TO RECEIVE FURTHER INFORMATION, CONTACT THE RECORDS, TAXES & TREASURY DIVISION, TAX DEED SECTION, 115 S. ANDREWS AVENUE ROOM #A-100, FORT LAUDERDALE, FLORIDA 33301-1895. PHONE: (954) 357-5374

FOR TAX DEEDS PROCESS AND AUCTION RULES, PLEASE VISIT
www.broward.org/recordstaxestreasury

BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
RECORDS, TAXES AND TREASURY DIVISION/TAX DEED SECTION

DATE: February 1st, 2019
PROPERTY ID # 504116-01-0860 (TD # 42188)

WARNING

PROPERTY IN WHICH YOU ARE INTERESTED IS LISTED IN THE ENCLOSED NOTICE

EILEEN MARTINEZ
5800 SW 19 STREET
PLANTATION, FL 33317

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DATE: February 1st, 2019
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RUBEN MARTINEZ
8581 SW 16 COURT
DAVIE, FL 33324

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BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
RECORDS, TAXES AND TREASURY DIVISION/TAX DEED SECTION

DATE: February 1st, 2019
PROPERTY ID # 504116-01-0860 (TD # 42188)

WARNING

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BROWARD COUNTY, CLERK OF THE CIRCUIT COURT
P.O. BOX 14610
FORT LAUDERDALE, FL 33302-4610

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CITY OF PLANTATION, CODE ENFORCEMENT OFFICE
451 NW 70TH TERRACE
PLANTATION, FL 33317

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CITY OF PLANTATION, SPECIAL MAGISTRATE
400 NW 73RD AVENUE
PLANTATION, FL 33317

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CITY OF SUNRISE
10770 WEST OAKLAND PARK BOULEVARD
SUNRISE, FL 33351

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BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
RECORDS, TAXES AND TREASURY DIVISION/TAX DEED SECTION

DATE: February 1st, 2019
PROPERTY ID # 504116-01-0860 (TD # 42188)

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INTERNAL REVENUE SERVICE, COLLECTION ADVISORY GROUP
7850 SW 6TH CT MS 5780
PLANTATION, FL 33324

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BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
RECORDS, TAXES AND TREASURY DIVISION/TAX DEED SECTION

DATE: February 1st, 2019
PROPERTY ID # 504116-01-0860 (TD # 42188)

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JULIA M NEAL, REGISTERED AGENT O/B/O PARK CITY MOBILE HOME ESTATES, INC.
8640 SW 20TH ST
FT LAUDERDALE, FL 33324

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8640 S W 20TH ST
FT LAUDERDALE, FL 33324

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FLORIDA DEPARTMENT OF REVENUE
ATTN DEKISHA CRAWFORD-SCM
3301 N UNIVERSITY DR #200
CORAL SPRINGS, FL 33065

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MARTINEZ, RUBEN
5800 SW 19 ST
PLANTATION, FL 33317-5919

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TOWN OF DAVIE
6591 ORANGE DR
DAVIE, FL 33314

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- Or
- * Estimated Amount due if paid by March 19, 2019\$4,610.22

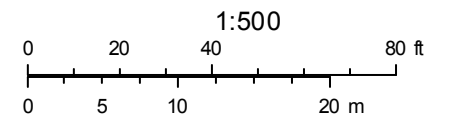
THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON March 20, 2019 UNLESS ALL BACK TAXES ARE PAID PRIOR TO AUCTION.

TO MAKE PAYMENT, OR TO RECEIVE FURTHER INFORMATION, CONTACT THE RECORDS, TAXES & TREASURY DIVISION, TAX DEED SECTION, 115 S. ANDREWS AVENUE ROOM #A-100, FORT LAUDERDALE, FLORIDA 33301-1895. PHONE: (954) 357-5374

FOR TAX DEEDS PROCESS AND AUCTION RULES, PLEASE VISIT
www.broward.org/recordstaxestreasury



December 13, 2018



7016 2290 0001 6629 0072

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OFFICIAL USE

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark
Here

Postage	
\$	
Total Postage and	
\$	

TD 42188 MARCH 2019 WARNING

Sent To
Street and Apt. N
City, State, ZIP+4

TOWN OF DAVIE
6591 ORANGE DR
DAVIE, FL 33314

U.S. Postal Service™
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Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark
Here

Postage	
\$	
Total Postage at	
\$	

TD 42188 MARCH 2019 WARNING
MARTINEZ, EILEEN
8581 SW 16 CT
DAVIE, FL 33324

Sent To
Street and Apt. N
City, State, ZIP+

6800 6299 1000 0622 9101
2018 2218 0001 6629 6889

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Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$

Total Postage at

\$

Sent To

Street and Apt. #

City, State, ZIP+

TD 42188 MARCH 2019 WARNING
EILEEN MARTINEZ
5800 SW 19 STREET
PLANTATION, FL 33317

9600 6299 1000 0622 9102
7018 2390 0001 6699 0096

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Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$

Total Postage at

\$

Sent To

Street and Apt. #

City, State, ZIP+

TD 42188 MARCH 2019 WARNING
MARTINEZ, RUBEN
5800 SW 19 ST
PLANTATION, FL 33317-5919

7018 2290 0001 6299 1000 0622 RT02

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Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$

Total Postage

\$

Sent To

Street and Apt

City, State, ZIP

TD 42188 MARCH 2019 WARNING
RUBEN MARTINEZ
8581 SW 16 COURT
DAVIE, FL 33324

7018 2290 0001 6629 0119
PT10 6299 1000 0622 PT02

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OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- | | |
|--|----------|
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ _____ |
| <input type="checkbox"/> Return Receipt (electronic) | \$ _____ |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ _____ |
| <input type="checkbox"/> Adult Signature Required | \$ _____ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ _____ |

Postmark
Here

Postage

\$

Total Postage and Fees

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

TD 42188 MARCH 2019 WARNING

JULIA M NEAL, REGISTERED AGENT O/B/O
PARK CITY MOBILE HOME ESTATES, INC.
8640 SW 20TH ST
FT LAUDERDALE, FL 33324

701A 2290 0001 6629 0126
9210 6299 1000 0622 9102

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$

Total Postage

TD 42188 MARCH 2019 WARNING

JULIA NEAL, REGISTERED AGENT
O/B/O PARK CITY MANAGEMENT CORP.
8640 S W 20TH ST
FT LAUDERDALE, FL 33324

\$

Sent To

Street and A

City, State, Z

7016 2290 0001 6629 0133
EETD 6299 1000 0622 PT02

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Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark
Here

Postage
\$
Total Postage and
\$

TD 42188 MARCH 2019 WARNING
FLORIDA DEPARTMENT OF REVENUE
ATTN DEKISHA CRAWFORD-SCM
3301 N UNIVERSITY DR #200
CORAL SPRINGS, FL 33065

Sent To
Street and Apt. No.
City, State, ZIP+4

0470 6299 1000 0622 9102
7018 2290 0001 6629 0102

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Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$

Total Postage a

\$

Sent To

Street and Apt. #

City, State, ZIP+

TD 42188 MARCH 2019 WARNING
INTERNAL REVENUE SERVICE,
COLLECTION ADVISORY GROUP
7850 SW 6TH CT MS 5780
PLANTATION, FL 33324

701A 2290 0001 6629 0157

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- | | |
|--|----------|
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ _____ |
| <input type="checkbox"/> Return Receipt (electronic) | \$ _____ |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ _____ |
| <input type="checkbox"/> Adult Signature Required | \$ _____ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ _____ |

Postmark
Here

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. N

City, State, ZIP+4

TD 42188 MARCH 2019 WARNING
CITY OF SUNRISE
10770 WEST OAKLAND PARK BLVD
SUNRISE, FL 33351

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

4970 6299 1000 0622 9702
7018 2290 0001 6629 0164

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OFFICIAL USE

Certified Mail Fee

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Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$

Total Postage a

\$

Sent To

Street and Apt. #

City, State, ZIP+

TD 42188 MARCH 2019 WARNING
CITY OF PLANTATION, CODE
ENFORCEMENT OFFICE
451 NW 70TH TERRACE
PLANTATION, FL 33317

7018 2290 0001 6629 0171
T470 6299 T000 0622 P102

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OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$

Total Postage \$

\$

Sent To

Street and Apt.

City, State, ZIP+

TD 42188 MARCH 2019 WARNING

CITY OF PLANTATION,
SPECIAL MAGISTRATE
400 NW 73RD AVENUE
PLANTATION, FL 33317

9870 6299 6299 1000 0622 9702

5670 6229 1000 6222 9100

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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OFFICIAL USE

Certified Mail Fee

\$ _____

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Apt. No. _____

City, State, ZIP+4® _____

TD 42188 MARCH 2019 WARNING
BROWARD COUNTY, CLERK OF
THE CIRCUIT COURT
P.O. BOX 14610
FORT LAUDERDALE, FL 33302-4610

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 42188 MARCH 2019 WARNING
 FLORIDA DEPARTMENT OF REVENUE
 ATTN DEKISHA CRAWFORD-SCM
 3301 N UNIVERSITY DR #200
 CORAL SPRINGS, FL 33065



9590 9402 4097 8092 9111 07

2. 7018 2290 0001 6629 0140

COMPLETE THIS SECTION ON DELIVERY

Signature

Anna Johnson

- Agent
- Addressee

Received by (Printed Name)

Johnson

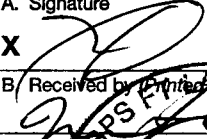

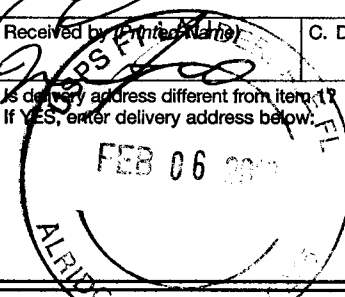
Date of Delivery

2-6-19

Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Registered Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature</p> <p>X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1 Article Addressed to:</p> <p style="text-align: center;">TD 42183 MARCH 2019 WARNING BROWARD COUNTY, CLERK OF THE CIRCUIT COURT P.O. BOX 14610 FORT LAUDERDALE, FL 33302-4610</p>  <p style="text-align: center;">9590 9402 4097 8092 9110 53</p>		<p>B. Received by (Printed Name) <input type="checkbox"/> C. Date of Delivery</p> <p><i>Alridge Station</i> <input type="checkbox"/></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;"></p>	
<p>2. 7018 2290 0001 6629 0195</p>		<p>3. Service Type <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery</p> <p style="text-align: right;">(over \$500)</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 42188 MARCH 2019 WARNING
 JULIA NEAL, REGISTERED AGENT O/B/O
 PARK CITY MANAGEMENT CORP.
 8640 S W 20TH ST
 FT LAUDERDALE, FL 33324



9590 9402 4097 8092 9107 11

2. 7018 2290 0001 6629 0133

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Ann Swart*

- Agent
- Addressee

B. Received by (Printed Name)

Ann Swart

C. Date of Delivery

2/6/19

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Delivery Restricted Delivery
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery
- Priority Mail Express®

(over \$500)

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 42188 MARCH 2019 WARNING
 JULIA M NEAL, REGISTERED AGENT O/B/O
 PARK CITY MOBILE HOME ESTATES, INC.
 8640 SW 20TH ST
 FT LAUDERDALE, FL 33324



9590 9402 4097 8092 9107 28

2 7018 2290 0001 6629 0126

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Ann Swart* Agent Addressee

B. Received by (Printed Name) *Ann Swart* C. Date of Delivery *2/6/19*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
- | | |
|---|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Registered Mail Restricted Delivery (over \$500) | |

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:


TD 42188 MARCH 2019 WARNING
 INTERNAL REVENUE SERVICE,
 COLLECTION ADVISORY GROUP
 7850 SW 6TH CT MS 5780
 PLANTATION, FL 33324



9590 9402 4097 8092 9110 91

2. 7018 2290 0001 6629 0157

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X  Agent
 Addressee

B. Received by (Printed Name) _____ C. Date of Delivery
 2/6/19

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 42188 MARCH 2019 WARNING
 CITY OF PLANTATION, CODE
 ENFORCEMENT OFFICE
 451 NW 70TH TERRACE
 PLANTATION, FL 33317



9590 9402 4097 8092 9110 77

7018 2290 0001 6629 0171

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *K Steven Goll* Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 K STEVEN GOLL 2/6

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 42188 MARCH 2019 WARNING
 CITY OF PLANTATION,
 SPECIAL MAGISTRATE
 400 NW 73RD AVENUE
 PLANTATION, FL 33317



9590 9402 4097 8092 9110 60

2 7018 2290 0001 6629 0188

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Julie Dragone*

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

2/6

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Delivery Restricted Delivery
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery
- Priority Mail Express®

(over \$500)

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 42188 MARCH 2019 WARNING
 CITY OF SUNRISE
 10770 WEST OAKLAND PARK BLVD
 SUNRISE, FL 33351



9590 9402 4097 8092 9110 84

2. 7018 2290 0001 6629 0164

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 [Signature] Agent
 Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

(over \$500) Restricted Delivery