

TitleExpress[®]

A service of Grant Street Group

**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: 01/26/2021

REPORT EFFECTIVE DATE: 20 YEARS UP TO 01/25/2021

CERTIFICATE # 2016-13202

ACCOUNT # 504205071230

ALTERNATE KEY # 493506

TAX DEED APPLICATION # 43398

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:

THE NORTH 50 FEET OF LOT 2 IN BLOCK 7, OF RIVER GARDENS, ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 19, PAGE 23 OF THE PUBIC RECORDS OF BROWARD COUNTY, FLORIDA.

PROPERTY ADDRESS: 535 NW 23 AVENUE, FORT LAUDERDALE FL 33311-7723

OWNER OF RECORD ON CURRENT TAX ROLL:

CALVIN WILLIAMS

CAROLYN WILLIAMS

535 NW 23 AVE

FORT LAUDERDALE, FL 33311 (Matches Property Appraiser records.)

APPARENT TITLE HOLDER & ADDRESS OF RECORD:

CALVIN WILLIAMS AND CAROLYN WILLIAMS

Instrument: 116165616

535 NW 23RD AVENUE

Instrument: 116165635

FORT LAUDERDALE, FL 33311

(Per Order of Summary Administration and Order Determining Homestead Status. Unable to locate prior deed in the Official Records of Broward County.)

MORTGAGE HOLDER OF RECORD:

None found.

LIENHOLDERS AND OTHER INTERESTED PARTIES OF RECORD:

FLORIDA TAX CERTIFICATE FUND MUNICIPAL TAX LLC

C/O FCAP CUSTODIAN FOR FTCFIMT LLC

PO BOX 775311

CHICAGO, IL 60677 (Tax Deed Applicant)

CITY OF FORT LAUDERDALE
SPECIAL MAGISTRATE
100 NORTH ANDREWS AVENUE
FORT LAUDERDALE, FL 33301 (Per Orders)

OR: 43577, Page: 1977
OR: 45716, Page: 214
OR: 46305, Page: 701
OR: 47047, Page: 1557
OR: 47636, Page: 1805
OR: 47667, Page: 1553
OR: 48055, Page: 1844
Instrument: 113906135
Instrument: 116371184
Instrument: 116747497

CITY OF FORT LAUDERDALE
CODE ENFORCEMENT DIVISION
700 NORTHWEST 19TH AVENUE
FORT LAUDERDALE, FL 33311 (Per Orders 43557-1977, 45716-214, 46305-701, 47047-1557, 47636-1805, 47667-1553, and 48055-1844.)

CITY OF FORT LAUDERDALE
CODE ENFORCEMENT DIVISION
BUILDING DEPARTMENT
700 NW 19TH AVENUE
FORT LAUDERDALE, FL 33311 (Per Orders 46305-701, 46305-701, 47047-1557, 47636-1805, 47667-1553, and 48055-1844.)

CITY OF FORT LAUDERDALE
CODE ENFORCEMENT DIVISION
DEPARTMENT OF SUSTAINABLE DEVELOPMENT
700 NW 19TH AVENUE
FORT LAUDERDALE, FL 33311 (Per Orders 113906135, 116371184 and 116747497.)

BROWARD COUNTY
CLERK OF THE CIRCUIT COURT
201 SE 6TH ST
FT LAUDERDALE, FL 33301 (Per Judgments)

OR: 46107, Page: 1066
OR: 47393, Page: 1930
OR: 47681, Page: 782
OR: 47994, Page: 655

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

OR: 47991, Page: 1954
OR: 48286, Page: 322
OR: 48359, Page: 1846
OR: 49598, Page: 1421
OR: 50355, Page: 960
OR: 50388, Page: 790
Instrument: 114402543

CACH, LLC
4340 S MONACO, SECOND FLOOR
DENVER, CO 80237 (Per Judgment)

OR: 48510, Page: 1714

STEPHEN H. BUTTER, ESQUIRE
TURNBERRY PLAZA PENTHOUSE
2875 NORTHEAST 191 STREET
AVENTURA, FL 33180 (Per Judgment)

OR: 50743, Page: 644

MIDLAND FUNDING LLC
PO BOX 290335
TAMPA, FL 33687 (Per Judgment)

Instrument: 113264508

DISCOVER BANK, ISSUER OF THE DISCOVER CARD Instrument: 114007453
210 SYLVAN AVENUE
ENGLEWOOD CLIFFS, NJ 07632
(Per Judgment. No Sunbiz record found.)

PROGRESSIVE SELECT INSURANCE COMPANY Instrument: 115040155
AS SUBROGEE FOR JAMES L. FENNELL
P.O. BOX 89480
CLEVELAND, OH 44101 (Per Judgment)

CITY OF FORT LAUDERDALE Instrument: 116298754
FINANCE DEPARTMENT
100 NORTH ANDREWS AVENUE
FORT LAUDERDALE, FL 33301 (Per Lien)

MEMORIAL REGIONAL HOSPITAL Instrument: 116704184
3501 JOHNSON ST
HOLLYWOOD, FL 33021 (Per Lien)

JESSICA CHACON-CHANG, AUTHORIZED REPRESENTATIVE
OF MEMORIAL REGIONAL HOSPITAL
2900 CORPORATE WAY
MIRAMAR, FL 33025 (Per Lien 116704184.)

PROPERTY INFORMATION REPORT – CONTINUED

PARCEL IDENTIFICATION NUMBER: 5042 05 07 1230

CURRENT ASSESSED VALUE: \$59,030

HOMESTEAD EXEMPTION: No

MOBILE HOME ON PROPERTY: No

OUTSTANDING CERTIFICATES: N/A

OPEN BANKRUPTCY FILINGS FOUND? No

OTHER INSTRUMENTS ASSOCIATED WITH PROPERTY BUT NO NOTICE REQUIRED:

None found.

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	535 NW 23 AVENUE, FORT LAUDERDALE FL 33311-7723	ID #	5042 05 07 1230
Property Owner	WILLIAMS, CALVIN WILLIAMS, CAROLYN	Millage	0312
Mailing Address	535 NW 23 AVE FORT LAUDERDALE FL 33311	Use	01
Abbr Legal Description	RIVER GARDENS 19-23 B LOT 2 N 50 BLK 7		

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)**.

* 2021 values are considered "working values" and are subject to change.

Property Assessment Values					
Year	Land	Building / Improvement	Just / Market Value	Assessed / SOH Value	Tax
2021*	\$14,890	\$44,140	\$59,030	\$59,030	
2020	\$14,890	\$44,140	\$59,030	\$59,030	\$1,658.34
2019	\$14,890	\$34,820	\$49,710	\$49,710	\$1,234.83

2021* Exemptions and Taxable Values by Taxing Authority				
	County	School Board	Municipal	Independent
Just Value	\$59,030	\$59,030	\$59,030	\$59,030
Portability	0	0	0	0
Assessed/SOH	\$59,030	\$59,030	\$59,030	\$59,030
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	\$59,030	\$59,030	\$59,030	\$59,030

Sales History			
Date	Type	Price	Book/Page or CIN
11/4/2019	OSA-T		116165616
11/4/2019	ODH-T		116165635

Land Calculations		
Price	Factor	Type
\$2.00	7,446	SF
Adj. Bldg. S.F. (Card, Sketch)		1220
Units		1
Eff./Act. Year Built: 1957/1956		

Special Assessments								
Fire	Garb	Light	Drain	Impr	Safe	Storm	Clean	Misc
03						F1		
R								
1						1		

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

CERTIFICATE OF MAILING NOTICES

Tax Deed #43398

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 April 2021, 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:

CALVIN WILLIAMS 535 NW 23RD AVE FORT LAUDERDALE, FL 33311-7723	WILLIAMS, CALVIN J 2910 NW 2ND ST FT LAUDERDALE, FL 33311- 8508	WILLIAMS, CALVIN L 301 SW 14 ST A FT LAUDERDALE, FL 33315	CACH, LLC 4340 S MONACO, SECOND FLOOR DENVER, CO 80237
CALVIN WILLIAMS 16501 NW 18 AVE MIAMI, FL 33054	CAROLYN WILLIAMS 535 NW 23RD AVE FORT LAUDERDALE, FL 33311-7723	CAROL S WILLIAMS 1146 NW 17TH AVE FT LAUDERDALE, FL 33311- 5858	CAROL WILLIAMS 5610 MAYO ST HOLLYWOOD, FL 33023-2328
CAROL WILLIAMS 2300 SW 83RD TER MIRAMAR, FL 33025-5130	CAROL WILLIAMS 1506 NW 13TH CT FT LAUDERDALE, FL 33311- 5370	CAROL ANGELA WILLIAMS 8990 S HOLLYBROOK BLVD APT 303 PEMBROKE PINES, FL 33025- 1356	CITY OF FORT LAUDERDALE ATTN: CITY ATTORNEY OFFICE 100 N ANDREWS AVE 7TH FLOOR FORT LAUDERDALE, FL 33301
CITY OF FORT LAUDERDALE, CODE ENFORCEMENT DIVISION 700 NORTHWEST 19TH AVENUE FORT LAUDERDALE, FL 33311	CITY OF FORT LAUDERDALE, CODE ENFORCEMENT DIVISION, BUILDING DEPARTMENT 700 NW 19TH AVENUE FORT LAUDERDALE, FL 33311	CITY OF FORT LAUDERDALE, CODE ENFORCEMENT DIVISION, DEPARTMENT OF SUSTAINABLE DEVELOPMENT 700 NW 19TH AVENUE FORT LAUDERDALE, FL 33311	CITY OF FORT LAUDERDALE, FINANCE DEPARTMENT 100 NORTH ANDREWS AVENUE FORT LAUDERDALE, FL 33301
CITY OF FORT LAUDERDALE, SPECIAL MAGISTRATE 100 NORTH ANDREWS AVENUE FORT LAUDERDALE, FL 33301	BROWARD COUNTY, CLERK OF THE CIRCUIT COURT 201 SE 6TH ST RM 18150 FT LAUDERDALE, FL 33301- 3303	DISCOVER BANK, ISSUER OF THE DISCOVER CARD 210 SYLVAN AVENUE ENGLEWOOD CLIFFS, NJ 07632	MIDLAND FUNDING LLC PO BOX 290335 TAMPA, FL 33687
MEMORIAL REGIONAL HOSPITAL 3501 JOHNSON ST HOLLYWOOD, FL 33021	JESSICA CHACON-CHANG, AUTHORIZED REPRESENTATIVE OF MEMORIAL REGIONAL HOSPITAL 2900 CORPORATE WAY MIRAMAR, FL 33025	PROGRESSIVE SELECT INSURANCE COMPANY, AS SUBROGEE FOR JAMES L. FENNELL P.O. BOX 89480 CLEVELAND, OH 44101	MARC J TANNEN ESQ 3616 NW 24TH AVE BOCA RATON, FL 33431-5407
STEVEN J JACOBSON ESQ LAW OFFICES OF STEVEN J JACOBSON, P.A. 5701 N PINE ISLAND RD, STE 320 FT LAUDERDALE, FL 33321	STEPHEN H. BUTTER, ESQ TURNBERRY PLAZA PENTHOUSE, 2875 NORTHEAST 191 STREET AVENTURA, FL 33180	LAW OFFICES OF ANDREU, PALMA & ANDREU, PL 701 SW 27TH AVE STE 900 MIAMI, FL 33135-3000	MARC J TANNEN ESQ 633 S ANDREWS AVE STE 500 FT LAUDERDALE, FL 33301- 2858
WILLIAMS, CAROLYN L EST % HELEN PEARL WILLIAMS 2601 ACACIA COURT FORT LAUDERDALE, FL 33301	WILLIAMS, CAROLYN L EST % HELEN PEARL WILLIAMS 3310 ALHAMBRA CIR HAMPTON GA 30228-3633	*CITY OF FORT LAUDERDALE 100 N ANDREWS AVE FORT LAUDERDALE, FL 33301-1016	*FREEMAN, ANTHONY & ANNETTE 541 NW 23RD AVE FT LAUDERDALE, FL 33311- 7723
*MONTANA, ANDERSON 529 NW 23RD AVE FORT LAUDERDALE, FL 33311-7723			

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 April 2021 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

INSTR # 117036653
Recorded 02/04/21 at 04:05 PM
Broward County Commission
1 Page(s)
#1

RECORDS, TAXES & TREASURY DIVISION/TAX DEED SECTION

NOTICE OF APPLICATION FOR TAX DEED NUMBER 43398

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: 504205-07-1230
Certificate Number: 13202
Date of Issuance: 05/25/2017
Certificate Holder: FLORIDA TAX CERTIFICATE FUND MUNICIPAL TAX LLC
Description of Property: RIVER GARDENS 19-23 B
LOT 2 N 50 BLK 7

Name in which assessed: WILLIAMS,CALVIN WILLIAMS,CAROLYN
Legal Titleholders: WILLIAMS,CALVIN
WILLIAMS,CAROLYN
535 NW 23 AVE
FORT LAUDERDALE, FL 33311

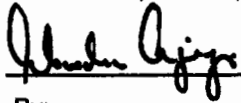
All of said property being in the County of Broward, State of Florida.

Unless such certificate shall be redeemed according to law the property described in such certificate will be sold to the highest bidder on the 19th day of May, 2021. 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 1st day of February, 2021.

Bertha Henry
County Administrator
RECORDS, TAXES, AND TREASURY DIVISION



By:

Abiodun Ajayi
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: 04/15/2021, 04/22/2021, 04/29/2021 & 05/06/2021
Minimum Bid: 11278.01

Broward County, Florida

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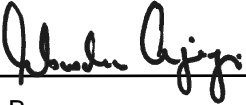
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Publish: DAILY BUSINESS REVIEW
Issues: 04/15/2021, 04/22/2021, 04/29/2021 & 05/06/2021
Minimum Bid: 11278.01

BROWARD DAILY BUSINESS REVIEW

Published Daily except Saturday, Sunday and
Legal Holidays
Ft. Lauderdale, Broward County, Florida

**STATE OF FLORIDA COUNTY
OF BROWARD:**

Before the undersigned authority personally appeared SCHERRIE A. THOMAS, who on oath says that he or she is the LEGAL CLERK, of the Broward Daily Business Review f/ k/a Broward Review, a daily (except Saturday, Sunday and Legal Holidays) newspaper, published at Fort Lauderdale, in Broward County, Florida; that the attached copy of advertisement, being a Legal Advertisement of Notice in the matter of

43398
NOTICE OF APPLICATION FOR TAX DEED
CERTIFICATE NUMBER: 13202

in the XXXX Court,
was published in said newspaper in the issues of

04/15/2021 04/22/2021 04/29/2021 05/06/2021

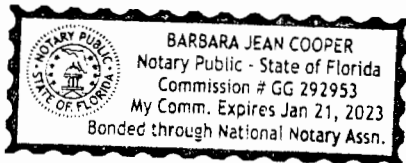
Affiant further says that the said Broward Daily Business Review is a newspaper published at Fort Lauderdale, in said Broward County, Florida and that the said newspaper has heretofore been continuously published in said Broward County, Florida each day (except Saturday, Sunday and Legal Holidays) and has been entered as second class mail matter at the post office in Fort Lauderdale in said Broward County, Florida, for a period of one year next preceding the first publication of the attached copy of advertisement; and affiant further says that he or she has neither paid nor promised any person, firm or corporation any discount, rebate, commission or refund for the purpose of securing this advertisement for publication in the said newspaper.

Scherrie A. Thomas

Sworn to and subscribed before me this
6 day of MAY, A.D. 2021

Barbara Jean Cooper

(SEAL)
SCHERRIE A. THOMAS personally known to me



**Broward County, Florida
RECORDS, TAXES & TREASURY
DIVISION/TAX DEED SECTION
NOTICE OF APPLICATION FOR
TAX DEED NUMBER 43398**

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MUNICIPAL TAX LLC

Description of Property:
RIVER GARDENS 19-23 B
LOT 2 N 50 BLK 7

Name in which assessed:
WILLIAMS, CALVIN WILLIAMS,
CAROLYN

Legal Titleholders:
WILLIAMS, CALVIN
WILLIAMS, CAROLYN
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FORT LAUDERDALE, FL 33311

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broward.deedauction.net

*Pre-registration is required to bid.

Dated this 1st day of February, 2021.

Bertha Henry
County Administrator
RECORDS, TAXES, AND
TREASURY DIVISION

(Seal)

By: Abiodun Ajayi
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.

Minimum Bid: 11278.01

401-314

4/15-22-29 5/6 21-04/0000523077B

BROWARD COUNTY SHERIFF'S OFFICE

2601 West Broward Blvd Fort Lauderdale, Florida 33312

Sheriff # 21012299

Broward County, FL VS Calvin Williams and/or Carolyn Williams

RETURN OF SERVICE



Court Case # TD 43398

Hearing Date:05/19/2021

Received by CCN 11002

04/09/2021 9:13 AM

Type of Writ: Tax Sale - Broward

Court: County / Broward FL

Serve: **Calvin Williams and/or Carolyn Williams 535 NW 23 Avenue Fort Lauderdale FL 33311**

Served:

Not Served:

Broward County Revenue-Delinquent Tax Section
115 S. Andrews Ave.
Room A-100
Fort Lauderdale FL 33301

Date: 04/09/2021 Time: 10:41 AM

On Calvin Williams and/or Carolyn Williams in Broward County, Florida, by serving the within named person a true copy of the writ with the date and time of service endorsed thereon by me, and copy of the complaint petition or initial pleading by the following method:

Other Returns: Other Returns

COMMENTS: Posted Tax Deed notice on front door.

You can now check the status of your writ by visting the Broward Sheriff's Office Website at www.sheriff.org and clicking on the icon "Service Inquiry"

**Gregory Tony, Sheriff
Broward County, Florida**

By: *C. Mitchell* 11002

D.S.

C. Mitchell, #11002

RECEIPT INFORMATION		EXECUTION COSTS	DEMAND/LEVY INFORMATION	
Receipt #			Judgment Date	n/a
Check #			Judgment Amount	\$0.00
Service Fee	\$0.00		Current Interest Rate	0.00%
On Account	\$0.00		Interest Amount	\$0.00
Quantity			Liquidation Fee	\$0.00
Original	1		Sheriff's Fees	\$0.00
Services	1		Sheriff's Cost	\$0.00
			Total Amount	\$0.00

BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
RECORDS, TAXES AND TREASURY DIVISION/TAX DEED SECTION
PROPERTY ID # 504205-07-1230 (TD #43398)

2021-07-13 11:17 AM
BROWARD COUNTY
RECORDS & TAXES DIVISION

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 April 30, 2021\$7,965.31
- Or
- * Amount due if paid by May 18, 2021\$8,053.78

*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 May 19, 2021 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

WILLIAMS, CALVIN AND/OR
WILLIAMS, CAROLYN
535 NW 23 AVE
FT LAUDERDALE, FL 33311-7723

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

**** FILED: BROWARD COUNTY, FL Brenda D. Forman, CLERK 11/4/2019 2:02:31 PM.****

IN THE 17TH JUDICIAL CIRCUIT COURT,
IN AND FOR BROWARD COUNTY, FLORIDA

PROBATE DIVISION
FILE NO.: PRC-16-3772
Division: _____

IN RE: ESTATE OF
LORRAINE HAMILTON,
Deceased.
_____ /

Filed in Open Court,
BRENDA D. FORMAN,
CLERK
ON 11-4-19
BY JH

ORDER DETERMINING HOMESTEAD STATUS OF REAL PROPERTY
(intestate-no spouse or minor children)

On the petition of Calvin Williams. for an order determining homestead status of real property (the "Property"), all interested persons having been served proper notice of petition and hearing, or having waived notice thereof, the court finds that:

1. The decedent died testate and was domiciled in Broward County, Florida;
2. The decedent was not survived by a spouse or minor child;
3. Decedent's homestead was validly devised to one or more heirs of the decedent;
4. At the time of death, the decedent owned and resided on the Property described in the petition, it is

ADJUDGED that the following described Property:

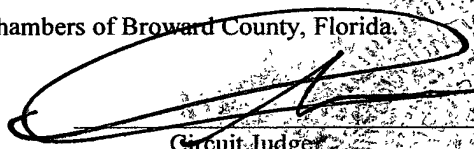
RIVER GARDENS 19-23 B LOT 2 N 50 BLK 7

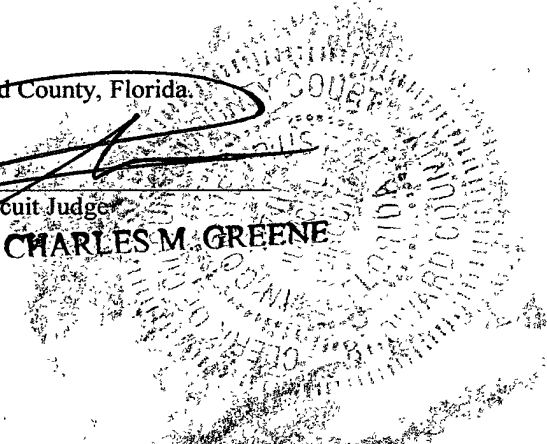
Also known as 535 NW 23rd Avenue, Fort Lauderdale, FL 33311 constituted the homestead of the decedent within the meaning of section 4 of Article x of the Constitution of the State of Florida.

ADJUDGED FURTHER that, as of the decedent's date of death, the Property was validly devised to and the constitutional exemption from the claims of decedent's creditors inured to the following persons:

NAME	ADDRESS	RELATIONSHIP	SHARE
Calvin Williams	535 NW 23 rd Avenue, Fort Lauderdale, FL 33311	Nephew	50%
Carolyn Williams	535 NW 23 rd Avenue, Fort Lauderdale, FL 33311	Niece	50%

ORDERED this _____ day of NOV 04 2019, _____ in the Chambers of Broward County, Florida.


Circuit Judge
CHARLES M. GREENE





CLAIM OF LIEN

STATE OF FLORIDA:

COUNTY OF BROWARD:

ACCOUNT: 2123245

FOLIO #: 0205071230

THIS INSTRUMENT PREPARED BY
FINANCE DEPARTMENT
CITY OF FORT LAUDERDALE
100 NORTH ANDREWS AVENUE
FORT LAUDERDALE, FLORIDA 33301
954-828-4650

BEFORE ME, THE UNDERSIGNED AUTHORITY, PERSONALLY APPEARED
LINDA LOGAN-SHORT, WHO BEING DULY SWORN, SAYS THAT HE/SHE IS THE DIRECTOR OF
FINANCE/DESIGNEE OF THE LIENOR HEREIN, THE CITY OF FORT LAUDERDALE WHOSE
ADDRESS IS 100 NORTH ANDREWS AVENUE, FORT LAUDERDALE, FLORIDA, 33301 AND THAT IN
PURSUANCE OF A CONTRACT WITH NAME: CALVIN WILLIAMS

ADDRESS: 535 NW 23RD AVE

LIENOR FURNISHED MUNICIPAL UTILITY SERVICES ON THE FOLLOWING DESCRIBED REAL-
PROPERTY IN BROWARD COUNTY, FLORIDA :


PROPERTY DESCRIPTION: LOT 2 N 50 BLK 7

PROPERTY SUBDIVISION : RIVER GARDENS 19-23 B

OWNED BY :
WILLIAMS, CALVIN & CAROLYN
535 NW 23 AVE
FORT LAUDERDALE, FL 33311-7723

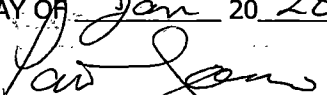
THERE REMAINS UNPAID \$448.13 PLUS COSTS AND
ADDITIONAL CHARGES AS SPECIFIED BY APPLICABLE
ORDINANCES AND FURNISHED THE FIRST OF THE SAME
ON 06/01/2016, AND THE LAST OF THE SAME ON
04/04/2019, IN WHICH AMOUNT THE CITY OF FORT
LAUDERDALE CLAIMS A LIEN UPON SAID PROPERTY.

SIGNED, SEALED AND DELIVERED
IN THE PRESENCE OF:


VERONICA WADE


DIRECTOR OF FINANCE/DESIGNEE
CITY OF FORT LAUDERDALE

SWORN TO AND SUBSCRIBED BEFORE ME THE

21 DAY OF Jan 20 20

NOTARY PUBLIC, STATE OF FLORIDA



PATT GAVIN
Commission # GG 944809
Expires February 2, 2024
Bonded Thru Budget Notary Services

ORDER IMPOSING A FINE

SPECIAL MAGISTRATE
CITY OF FORT LAUDERDALE, FLORIDA

Space Reserved Recording Information

CITY OF FORT LAUDERDALE
Petitioner,

CASE NO. CE19041948

vs.

WILLIAMS, CALVIN
WILLIAMS, CAROLYN
Respondent(s)

That pursuant to Chapter 11 of the Code of Ordinances of the City of Fort Lauderdale, the City of Fort Lauderdale Special Magistrate, 100 North Andrews Avenue, Fort Lauderdale, Florida 33301, hereby enters its Order based on the following findings of fact and conclusions of law. Please be advised that this Order shall constitute a lien on your property.

1. That the violation(s) of the City of Fort Lauderdale Code of Ordinances occurred on the following described real property situate, lying and being in Broward County, Florida, to wit:

Folio: 0205071230

Legal: RIVER GARDENS 19-23 B LOT 2 N 50 BLK 7

More commonly known as: 535 NW 23 AV

2. That the Special Magistrate did issue on the 5th day of September 2019, a Final Order in the above captioned case commanding the above name respondents(s) to bring the violations specified in said Final Order into compliance on or before the 7th day of November 2019 or pay a fine in the amount of \$50.00 per day for the violation of 9-305(b).
3. On January 16, 2020, the Special Magistrate found that the respondent(s) did not comply with the Final Order and any subsequent orders on or before the date specified therein, based on the testimony and evidence as presented. The Special Magistrate, on the 16th day of January 2020, did impose a fine in the amount of \$3,500.00 which continues to accrue.
4. It is the order of the Special Magistrate that the fine specified in said Final Order is hereby confirmed and ratified, plus the recovery of reasonable attorney's fees in any foreclosure of the lien.
5. The City shall record a certified copy of this Order in the Public Records of Broward County 30 days from the above date of the Special Magistrate Hearing. Once recorded, this Order shall constitute a lien on the subject property as well as on any other real or personal property owned by the Respondent.

Case No: CE19041948
Property: 535 NW 23 AV

LIEN AND FORECLOSURE NOTICE:

Please be advised that this lien shall be recorded in the public records for Broward County and may be foreclosed by the City of Fort Lauderdale if not paid in full within ninety days.

DONE AND ORDERED this 16th day of January 2020.

ATTEST:

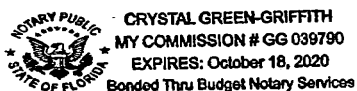
Mary Allman
Clerk, Special Magistrate

Rose Ann Flynn
Special Magistrate

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements, personally appeared Rose Ann Flynn, Special Magistrate, known to me to be the person described therein and who executed the foregoing instrument and acknowledged before me that he executed same, and who did (did not) take an Oath.

STATE OF FLORIDA:
COUNTY OF BROWARD:

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this 16th day of January 2020, by Rose-Ann Flynn, as Special Magistrate, of the City of Fort Lauderdale, and Mary Allman, as Clerk of the Special Magistrate for the City of Fort Lauderdale.



[Signature]
(Signature of Notary Public, State of Florida)

(Printed, Typed, or Stamped Commissioned Name of Notary)

Personally Known OR Produced Identification _____

Type of Identification Produced _____

This instrument prepared by and returns to:

Crystal Green-Griffith
Code Enforcement Division
Department of Sustainable Development
City of Fort Lauderdale
700 NW 19th Avenue
Fort Lauderdale, FL 33311
(954) 828-4608

Instr# 114923401 , Page 1 of 2, Recorded 03/01/2018 at 04:32 PM
Broward County Commission

**** FILED: BROWARD COUNTY, FL Brenda D. Forman, CLERK 3/1/2018 3:05:26 PM.****

IN THE COUNTY COURT, IN AND FOR BROWARD COUNTY, FLORIDA

PROGRESSIVE SELECT INSURANCE
COMPANY, as Subrogee for
James L. Fennell,

Plaintiff,

vs.

CASE NO.: COWE-17-011675 (83)

CALVIN WILLIAMS,

Defendant.

_____ /

DEFAULT FINAL JUDGMENT

THIS ACTION was considered pursuant to a Default entered by this Court against Defendant, CALVIN WILLIAMS, for failure to appear at the Pretrial Conference on October 10, 2017, and upon review of the court file and otherwise being advised in the premises,

IT IS ORDERED AND ADJUDGED that Plaintiff, PROGRESSIVE SELECT INSURANCE COMPANY, P.O. Box 89480, Cleveland, OH 44101, recover from Defendant, CALVIN WILLIAMS, whose last known address is 535 NW 23rd Avenue, Ft. Lauderdale, FL 33311, and whose Social Security Number is [REDACTED] for property damage in the amount of \$3,000.23, costs in the amount of \$397.75, and interest in the amount of \$645.71, for the sum of \$4,043.69, which shall bear interest at the rate of 5.53% a year, for which let execution issue.

PROGRESSIVE SELECT INSURANCE COMPANY v. CALVIN WILLIAMS
CASE NUMBER: COWE-17-011675 (83)
DEFAULT FINAL JUDGMENT

IT IS FURTHER ORDERED AND ADJUDGED, pursuant to Rule 7.221, Fl. R. Civ. P., that the judgment debtor(s) shall complete under oath Florida Rule of Civil Procedure Form 7.343 (Fact Information Sheet), including all required attachments, and serve it on the judgment creditor's attorney, or the judgment creditor if the judgment creditor is not represented by an attorney, within 45 days from the date of this Default Final Judgment, unless the Default Final Judgment is satisfied or post-judgment discovery is stayed.

Jurisdiction of this case is retained to enter further orders that are proper to compel the judgment debtor(s) to complete Form 7.343, including all required attachments, and serve it on the judgment creditor's attorney, or the judgment creditor if the judgment creditor is not represented by an attorney.

DONE AND ORDERED in Chambers in Broward County, Florida on ~~February~~ ^{March} 1, 2018.



HONORABLE JANE D. FISHMAN

Copies Furnished to:


Calvin Williams
535 NW 23rd Avenue
Ft. Lauderdale, FL 33311
(with Fact Information Sheet 7.343)

Plaintiff's Attorney:
Steven J. Jacobson, Esq.
Law Offices of Steven J. Jacobson, P.A.
5701 N. Pine Island Rd., Suite 320
Fort Lauderdale, FL 33321
(954) 726-6626
sjjlaw@bellsouth.net

\\SERVER\Client Files\PROGRESSIVE\Prog. vs. Williams, Calvin\Prog vs. Williams, Calvin DFJ et wpd



I hereby certify this document to be a true, correct and complete copy of the record filed in my office.
Dated this 26 day of April, 2018 County Administrator.

By 
Deputy Clerk

IN THE CIRCUIT COURT OF THE SEVENTEENTH JUDICIAL CIRCUIT IN AND FOR BROWARD COUNTY, FLORIDA

Case Number: 06-0014504-CA

In Re: WILLIAMS,ADRENA * CONFIDENTIAL ADDRESS * *****

Petitioner

vs.

WILLIAMS,CALVIN 16501 NW 18 AVE MIAMI, FL 33054 Respondent

JUDGMENT / CERTIFICATE OF DELINQUENCY

The undersigned, being the duly authorized and responsible local depository for court-ordered support payments pursuant to F.S. 61.181 , in BROWARD County hereby certifies that

WILLIAMS,CALVIN

has failed to pay into the depository the court-ordered support payment as mandated by the current Support Order in this cause. As of this date, the total support arrearage is \$10620.00 balance at terms, not including any costs or fees.

I further certify that WILLIAMS,CALVIN was issued a Notice of Delinquency on 3/6/2009 , and thirty (30) or more days have elapsed since the delinquent payment referenced above was due. Pursuant to F.S. 61.14 this Certificate evidences a Final Judgment by operation of law for all past due and future payments together with all applicable costs and fees as otherwise provided by law for which execution may issue and which has the full force, effect and attributes of a Judgment entered by a Court in the State of Florida.

Dated this 3rd day of April, 2009

HOWARD C. FORMAN CLERK OF COURT

By: [Signature] Deputy Clerk

IN THE CIRCUIT COURT OF THE SEVENTEENTH JUDICIAL CIRCUIT IN AND FOR BROWARD COUNTY, FLORIDA

Case Number: 02-0010174-CA

In Re: OLIPHANT, EBONI D * CONFIDENTIAL ADDRESS * *****

Petitioner

vs.

WILLIAMS, CALVIN J 2910 NW 2 ST FT LAUDERDALE, FL 33311 Respondent

JUDGMENT / CERTIFICATE OF DELINQUENCY

The undersigned, being the duly authorized and responsible local depository for court-ordered support payments pursuant to F.S.61.181 , in BROWARD County hereby certifies that

WILLIAMS, CALVIN J

has failed to pay into the depository the court-ordered support payment as mandated by the current Support Order in this cause. As of this date, the total support arrearage is \$13789.97 balance at terms, not including any costs or fees.

I further certify that WILLIAMS, CALVIN J was issued a Notice of Delinquency on 9/1/2010 , and thirty (30) or more days have elapsed since the delinquent payment referenced above was due. Pursuant to F.S.61.14 this Certificate evidences a Final Judgment by operation of law for all past due and future payments together with all applicable costs and fees as otherwise provided by law for which execution may issue and which has the full force, effect and attributes of a Judgment entered by a Court in the State of Florida.

Dated this 23rd day of September, 2010

HOWARD C. FORMAN CLERK OF COURT

Handwritten signature of Carol Dandy

By: Deputy Clerk

IN THE CIRCUIT COURT OF THE SEVENTEENTH JUDICIAL CIRCUIT IN AND FOR BROWARD COUNTY, FLORIDA

Case Number: 05-0018615-CA

In Re: MALCOLM,JOI T * CONFIDENTIAL ADDRESS * *****

Petitioner

vs.

WILLIAMS,CALVIN L 301 SW 14 ST A FT LAUDERDALE, FL 33315 Respondent

JUDGMENT / CERTIFICATE OF DELINQUENCY

The undersigned, being the duly authorized and responsible local depository for court-ordered support payments pursuant to F.S.61.181 , in BROWARD County hereby certifies that

WILLIAMS,CALVIN L

has failed to pay into the depository the court-ordered support payment as mandated by the current Support Order in this cause. As of this date, the total support arrearage is \$2201.08 balance at terms, not including any costs or fees.

I further certify that WILLIAMS,CALVIN L was issued a Notice of Delinquency on 1/6/2011 , and thirty (30) or more days have elapsed since the delinquent payment referenced above was due. Pursuant to F.S.61.14 this Certificate evidences a Final Judgment by operation of law for all past due and future payments together with all applicable costs and fees as otherwise provided by law for which execution may issue and which has the full force, effect and attributes of a Judgment entered by a Court in the State of Florida.

Dated this 28th day of January, 2011

HOWARD C. FORMAN CLERK OF COURT

Handwritten signature of Carol Dandy

By: Deputy Clerk

IN THE CIRCUIT COURT OF THE
SEVENTEENTH JUDICIAL CIRCUIT
IN AND FOR BROWARD COUNTY, FLORIDA

Case Number: 07-0001600-CA

In Re:
WILLIAMS,MELISSA
* CONFIDENTIAL ADDRESS *

Petitioner

vs.

WILLIAMS,CALVIN
535 NW 23 AVE
FORT LAUDERDALE, FL 33311-7723
Respondent

JUDGMENT / CERTIFICATE OF DELINQUENCY

The undersigned, being the duly authorized and responsible local depository for court-ordered support payments pursuant to F.S.61.181 , in BROWARD County hereby certifies that

WILLIAMS,CALVIN

has failed to pay into the depository the court-ordered support payment as mandated by the current Support Order in this cause. As of this date, the total support arrearage is \$18981.00 balance at terms, not including any costs or fees.

I further certify that WILLIAMS,CALVIN was issued a Notice of Delinquency on 6/1/2011 , and thirty (30) or more days have elapsed since the delinquent payment referenced above was due. Pursuant to F.S.61.14 this Certificate evidences a Final Judgment by operation of law for all past due and future payments together with all applicable costs and fees as otherwise provided by law for which execution may issue and which has the full force, effect and attributes of a Judgment entered by a Court in the State of Florida.

Dated this 23rd day of June, 2011

HOWARD C. FORMAN
CLERK OF COURT



By:
Deputy Clerk

27

AS

IN THE COUNTY COURT
IN AND FOR BROWARD COUNTY, FLORIDA

CASE NO: 10-00524-COWE-82

CACH, LLC,
Plaintiff,

DEFAULT FINAL JUDGMENT

vs.
CAROL WILLIAMS,
Defendant(s)

IT IS HEREBY ORDERED AND ADJUDGED THAT:

Plaintiff whose address is 4340 S. Monaco, Second Floor, Denver CO 80237 shall recover from Defendant(s), CAROL WILLIAMS, the principal sum of \$1,771.89, attorney's fees in the amount of \$450.00, court costs in the amount of \$225.00, interest in the amount of \$244.28, the total of which shall bear interest at the rate of 6% per annum, for all of the above let execution issue.

IT IS FURTHER ORDERED AND ADJUDGED THAT:

The Defendant(s) shall complete Florida Rules Form 1.977 (Fact Information Sheet) and return it to the Plaintiff's attorney, within 45 days from the date of this Final Judgment unless it is satisfied or a motion for new trial or notice of appeal is filed.

Jurisdiction of this case is retained to enter further orders that are proper to compel the Defendant(s) to complete the Fact Information Sheet and return it to the Plaintiff's attorney.

DONE AND ORDERED at BROWARD County, Florida on this 23 day of Aug 23 2010, 2010.

[Signature]
COUNTY COURT JUDGE

Copies furnished to:
LAW OFFICES OF ANDREU, PALMA & ANDREU, PL
701 SW 27th Avenue, Ste. 900
Miami, FL 33135.

CAROL WILLIAMS
5610 MAYO ST
HOLLYWOOD FL 33023-2328

09-10129

MS



I hereby certify this document to be a true, correct and complete copy of the record filed in my office. Dated this 7th day of Feb 2010, Bertha Henry, County Administrator.

By [Signature]
Deputy Clerk

①

STEPHEN BUTTER, P.A. DEPUTY CLERK

PAGE 01

10:58

3 822715

SHB/as

IN THE CIRCUIT COURT OF THE 17TH JUDICIAL CIRCUIT IN AND FOR BROWARD COUNTY, FLORIDA

CASE NO : 05-015111 CACE

DIVISION : (08)

JUDGE : ROTHSCHILD

ROBERT L. FAST,

Plaintiff,

vs.

JUDY M. FAST n/k/a JUDY MONTAQUE,

Intervener,

vs.

CAROLYN L. WILLIAMS,

Defendant.

INSTR # 108756163
OR BK 46406 Pages 1443 - 1444
RECORDED 07/24/09 15:12:57
BROWARD COUNTY COMMISSION
DEPUTY CLERK 2090
#1, 2 Pages

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BROWARD COUNTY
2009 JUL 20 PH 3:00
COPY/VIEW ROOM

FINAL JUDGMENT IN FAVOR OF
STEPHEN H. BUTTER, P.A. AND
AGAINST CAROLYN L. WILLIAMS
AWARDING REASONABLE
ATTORNEY'S FEES AND COURT
COSTS

THIS CAUSE came on for hearing upon Stephen H, Butter, P.A.'s motion for attorney's fees and court costs, and the court being cognizant of the Supreme Court decision of FLORIDA PATIENT'S COMPENSATION FUND VS. ROWE, 472 So.2d 1145 (Fla.1985) and the trial court having considered the criteria for establishing reasonable attorney's fees and finds:

A. The court heard the testimony of Stephen H. Butter, P.A. reviewed an expert witness affidavit, reviewed any affidavits in support of reasonable attorney's fees, arguments of counsel, and was being otherwise fully advised in the premises; and further

B. Since the first step in the lodestar process requires the court to determine the number of hours reasonably expended on this litigation. The court finds that the reasonable number of hours expended on behalf of Robert L. Fast in this litigation to which he is responsible was twenty hours.

C. Pursuant to ROWE, the second half of the equation requires this Court to determine a reasonable hourly rate for the services performed by Stephen H. Butter, P.A.

STEPHEN BUTTER:KER

07/21/2009 10:50 36 021515

FAST VS. WILLIAMS, ET AL
05-015111 CASE 18

Page 2

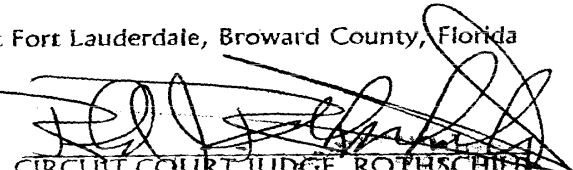
The court finds that Stephen H. Butter, P.A. has met his burden of proof and has established that the prevailing market rate, (the rate charged in this community by lawyers of comparable skill and experience of Stephen H. Butter, P.A. for similar services) is \$400 per hour.

D. Therefore, pursuant to ROWE, twenty was the number of hours reasonably expended in this case to which Carolyn L. Williams is responsible and multiplied by the reasonable hourly rate of \$400 means that a reasonable fee for which Carolyn L. Williams is responsible is \$8,000.

THEREFORE, IT IS ORDERED AND ADJUDGED as follows:

1. That a final judgment be and is hereby entered in favor of Stephen H. Butter and against Carolyn L. Williams in the amount of \$8,000 for which let execution issue.

DONE AND ORDERED in Chambers at Fort Lauderdale, Broward County, Florida
this 21st day of July 2009

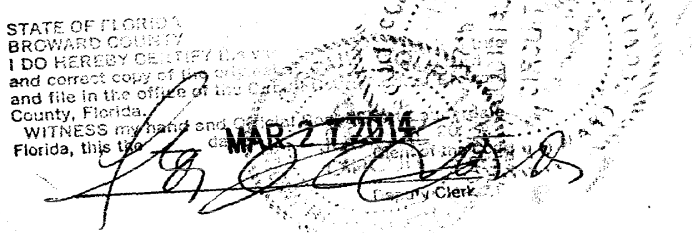

CIRCUIT COURT JUDGE ROTHSCHILD

Copies furnished to:

Stephen H. Butter, Esquire
Turnberry Plaza Penthouse
2875 Northeast 191 Street
Aventura, Florida 33180

Mark Santi, Esquire

Carolyn L. Williams, Defendant
pro se

STATE OF FLORIDA
BROWARD COUNTY
I DO HEREBY CERTIFY I have
and correct copy of the original
and file in the office of the Clerk
County, Florida.
WITNESS my hand and seal
Florida, this 21st day of July 2009

Clerk

INSTR # 112540796, OR BK 51107 PG 934, Page 1 of 1, Recorded 09/19/2014 at 02:36 PM, Broward County Commission, Deputy Clerk ERECORD

**** FILED: BROWARD COUNTY, FL Howard C. Forman, CLERK 9/18/2014 10:13:48 AM.****

IN THE COUNTY COURT OF THE SEVENTEENTH JUDICIAL CIRCUIT IN AND FOR BROWARD COUNTY, FLORIDA

CASE NO: CONO-14-003645

MIDLAND FUNDING LLC
Plaintiff,

vs.

CAROL WILLIAMS,
Defendant.

DEFAULT FINAL JUDGMENT

This action came before the Court after entry of default against the Defendant, it is hereby:

ORDERED AND ADJUDGED THAT:

Plaintiff, MIDLAND FUNDING LLC, whose address is PO Box 290335; Tampa, FL 33687, shall recover from Defendant CAROL WILLIAMS, the principal sum of \$1227.52 plus pre-judgment interest in the amount of \$0.00 and court costs in the amount of \$238.00, less payments made of \$0.00 for a total amount due of \$1465.52, all of which shall bear interest at the prevailing statutory rate, currently 4.75% per year from this date through December 31 of this year, thereafter, on January 1 of each succeeding year, until the Judgment is paid or otherwise satisfied, the interest rate will adjust in accordance with Section 55.03 Florida Statutes. For all of which let execution issue.

It is further Ordered and Adjudged that the Defendant shall complete Florida Rules Form 7.343 (Fact Information Sheet), and return it to Plaintiff's attorney within 45 days from the date of this Final Judgment, unless the Judgment has been satisfied or a motion for new trial or notice of appeal has been filed, or post-judgment discovery has been stayed. The Fact Information Sheet should NOT be filed with the Court and need not be recorded in the Public Records.

Jurisdiction in this case is retained to enter further orders that are proper to compel the Defendant to complete the Fact Information Sheet and return it to Plaintiff's attorney.

DONE AND ORDERED at BROWARD County, Florida, this 17th day of September, 20 14.

COUNTY COURT JUDGE

Copies furnished to:
Amanda R. Duffy, Attorneys for Plaintiff, PO Box 290335; Tampa, FL 33687
IL_FL@mcmcg.com

Carol Williams at 2300 Sw 83rd Ter , Miramar, FL 33025

197978



I hereby certify this document to be a true, correct and complete copy of the record filed in my office. Dated this 29 day of September, 20 15
County Administrator
By [Signature]
Deputy Clerk

IN THE COUNTY COURT IN AND
FOR BROWARD COUNTY, FLORIDA

CASE NO. 06 01906

DISCOVER BANK, ISSUER OF THE
DISCOVER CARD

Plaintiff,

vs.

Carol S Williams
Terrence V Smith

Defendant(s).

STATE OF FLORIDA
BROWARD COUNTY
I DO HEREBY CERTIFY the within and foregoing is a true
and correct copy of the original as it appears on record
and file in the office of the Circuit Court Clerk of Broward
County, Florida.
WITNESS my hand and Official Seal at Fort Lauderdale
Florida, this the 18 day of Sept, 2016.
Howard G. Forness
Clerk of the Courts



DEFAULT FINAL JUDGMENT

This cause, having come before the court and the court having reviewed the same and being otherwise duly advised in the premises,

IT IS ADJUDGED that Plaintiff, DISCOVER BANK, ISSUER OF THE DISCOVER CARD recover from the Defendant(s), Carol S Williams, the sum of \$6864.06 on principal, and \$295.00 for costs making a total of \$7159.06 that shall bear interest at the rate of 9% per year, for which let execution issue.

ORDERED in BROWARD County, Florida, this 18 day of Sept, 2006.

JUDGE [Signature]
2016 SEP 18 PM 1:52
RECEIVED
CIRCUIT COURT
BROWARD COUNTY, FL.

Plaintiff's Address:

DISCOVER BANK, ISSUER OF THE DISCOVER CARD 210 SYLVAN AVENUE, ENGLEWOOD
CLIFFS NJ 07632

Account No: [REDACTED]

Copies furnished to:

Sasha Haro, Esq., Zakheim & Associates, P.A., 1045 S. University Dr., Ste. # 202, Plantation, FL 33324
Carol S Williams, 1146 NW 17TH AVE., FT LAUDERDALE FL 33311-5858, [REDACTED]

THIS IS AN ATTEMPT TO COLLECT A DEBT AND ANY INFORMATION OBTAINED WILL BE
USED FOR THAT PURPOSE. THIS COMMUNICATION IS FROM A DEBT COLLECTOR.

File Number: 3000105003.001



KB

ORDER IMPOSING A FINE

SPECIAL MAGISTRATE
CITY OF FORT LAUDERDALE, FLORIDA

Space Reserved for Recording Information

CITY OF FORT LAUDERDALE
Petitioner,

CASE NO. CE06100962

v.
SMITH, TERRENCE & WILLIAMS, CAROL S
Respondent(s)

That pursuant to Section 162.09 of the Florida Statutes, the City of Fort Lauderdale Special Magistrate, 100 North Andrews Avenue, Fort Lauderdale, Florida 33301, hereby enters its Order based on the following findings of fact and conclusions of law. Please be advised that this Order shall constitute a lien on your property.

- 1. That the violation(s) of the City of Fort Lauderdale Code of Ordinances occurred on the following described real property situate, lying and being in Broward County, Florida, to wit:

Folio: 9233041420

Legal: LAUDERDALE MANORS AMD PLAT 28-11 B LOT 2 BLK 6

More commonly known as: 1146 NW 17 AVE

- 2. That the Special Magistrate did issue on the 27th day of November 2006, a Final Order in the above captioned case commanding the above named respondent(s) to bring the violations specified in said Final Order into compliance on or before the 27th day of December, 2006, or pay a fine in the amount of \$100.00 per day for each day of non-compliance thereafter.
- 3. That the respondent(s) did not comply with the Final Order on or before the date specified therein as evidenced by the Inspector filing an executed Affidavit of Non-Compliance with the Special Magistrate.
- 4. It is the order of the Special Magistrate that the fine specified in said Final Order is hereby confirmed and ratified, and shall accrue at the per diem specified until such time as the above named Respondent(s) shall comply with said Final Order, plus the recovery of reasonable attorney's fees in any foreclosure of the lien.
- 5. The City shall record a certified copy of this Order in the Public Records of Broward County. Once recorded, this Order shall constitute a lien on the subject property as well as on any other real or personal property owned by the Respondent.

I certify this document to be a true and correct copy of the original.
WITNESS MY HAND AND SEAL
on Jan 29 2007
W. B. ...
Clerk, Code Enforcement Board, Special Magistrate
Unsafe Structures Board
City of Fort Lauderdale, Fla.

(2)

Case No: CE06100962
Property: 1146 NW 17 AVE

LIEN AND FORECLOSURE NOTICE:

Please be advised that this lien shall be recorded in the public records for Broward County and may be foreclosed by the City of Fort Lauderdale if not paid in full within ninety days.

DONE AND ORDERED this 22nd day of January, 2007.

Floyd V. Hull
Special Magistrate

ATTEST:
Erin M. Saey
Clerk, Special Magistrate

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements, personally appeared Floyd V. Hull, Special Magistrate, known to me to be the person described therein and who executed the foregoing instrument and acknowledged before me that he executed same, and who did (did not) take an Oath.

WITNESS my hand and official seal in the County and State as aforesaid this 24 day of January 2007.

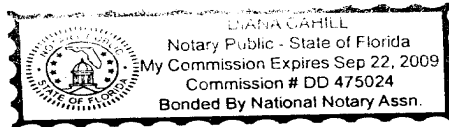
This instrument prepared by:
City Attorney's Office
City of Fort Lauderdale
100 North Andrews Avenue
Fort Lauderdale, Florida 33301

Diana Cahill
NOTARY PUBLIC, State of Florida

Print Name

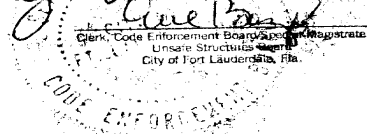
My Commission Expires

Return to:
Erin M. Saey
Code Enforcement Division
City of Fort Lauderdale
700 Northwest 19th Avenue
Fort Lauderdale, Florida 33311
(954) 828-5327



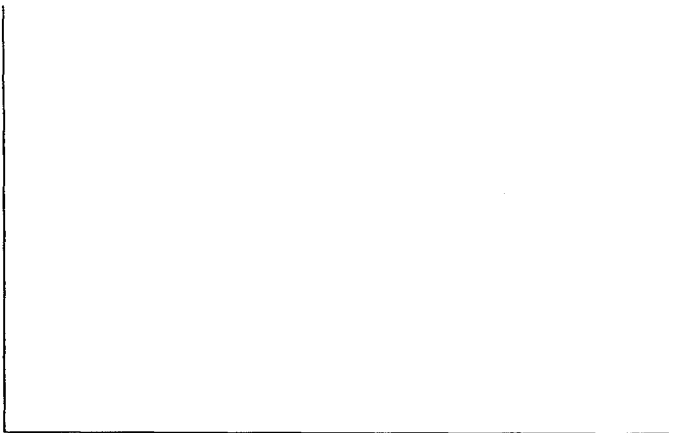
I certify this document to be a true and correct copy of the original.

WITNESS MY HAND AND SEAL
on Jan 26 2007



ORDER IMPOSING A FINE

SPECIAL MAGISTRATE
CITY OF FORT LAUDERDALE, FLORIDA



Space Reserved for Recording Information

CITY OF FORT LAUDERDALE
Petitioner,

CASE NO. CE08041939

v.

WILLIAMS, CAROLYN
Respondent(s)

That pursuant to Section 162.09 of the Florida Statutes, the City of Fort Lauderdale Special Magistrate, 100 North Andrews Avenue, Fort Lauderdale, Florida 33301, hereby enters its Order based on the following findings of fact and conclusions of law. Please be advised that this Order shall constitute a lien on your property.

1. That the violation(s) of the City of Fort Lauderdale Code of Ordinances occurred on the following described real property situate, lying and being in Broward County, Florida, to wit:

Folio: 9232180390

Legal: LAKE AIRE ESTATES 54-15 B LOT 18 BLK 2

More commonly known as: 1761 NW 27 TER

2. That the Special Magistrate did issue on the 7th day of August 2008, a Final Order in the above captioned case commanding the above name respondents(s) to bring the violations specified in said Final Order into compliance on or before the 21st day of August 2008, or pay a fine in the amount of \$25.00 per day for the violation of ordinance 9-279(f) for each day of non-compliance thereafter.
3. That the respondent(s) did not comply with the Final Order on or before the date specified therein as evidenced by the Inspector filing an executed Affidavit of Non-Compliance with the Special Magistrate
4. It is the order of the Special Magistrate that the fine specified in said Final Order is hereby confirmed and ratified, and shall accrue at the per diem specified until such time as the above named Respondent(s) shall comply with said Final Order, plus the recovery of reasonable attorney's fees in any foreclosure of the lien.
5. The City shall record a certified copy of this Order in the Public Records of Broward County. Once recorded, this Order shall constitute a lien on the subject property as well as on any other real or personal property owned by the Respondent.

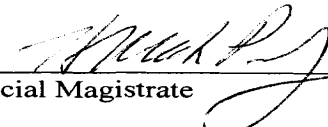
I certify this document to be a true and correct copy of the original.
WITNESS MY HAND AND SEAL
on 9/23/08 2008
SPECIAL MAGISTRATE
Code Enforcement Board
Broward County, Florida

Case No: CE08041939
Property: 1761 NW 27 TER

LIEN AND FORECLOSURE NOTICE:

Please be advised that this lien shall be recorded in the public records for Broward County and may be foreclosed by the City of Fort Lauderdale if not paid in full within ninety days.

DONE AND ORDERED this 18th day of September, 2008.


Special Magistrate

ATTEST:


Clerk, Special Magistrate

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements, personally appeared H. Mark Purdy, Special Magistrate, known to me to be the person described therein and who executed the foregoing instrument and acknowledged before me that he executed same, and who did (did not) take an Oath.

WITNESS my hand and official seal in the County and State as aforesaid this 23 day of September 2008.

This instrument prepared by:
City Attorney's Office
City of Fort Lauderdale
100 North Andrews Avenue
Fort Lauderdale, Florida 33301


NOTARY PUBLIC, State of Florida

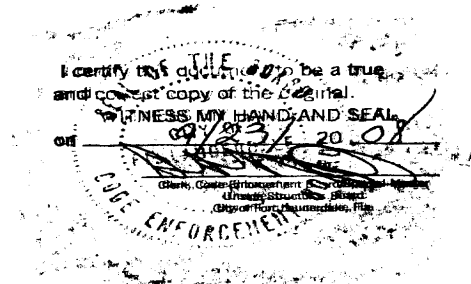
Print Name

My Commission Expires

Return to:
Erin M. Peck
Code Enforcement Division
City of Fort Lauderdale
700 Northwest 19th Avenue
Fort Lauderdale, Florida 33311
(954) 828-5327



ERIN M. PECK
MY COMMISSION # DD 745297
EXPIRES: December 30, 2011
Bonded Thru Budget Notary Services



35

ORDER IMPOSING A FINE

SPECIAL MAGISTRATE
CITY OF FORT LAUDERDALE, FLORIDA

Space Reserved for Recording Information

CITY OF FORT LAUDERDALE
Petitioner,

CASE NO. CE08101711

v.

WILLIAMS, CAROL & DAVID
Respondent(s)

That pursuant to Chapter 11 of the Code of Ordinances of the City of Fort Lauderdale, the City of Fort Lauderdale Special Magistrate, 100 North Andrews Avenue, Fort Lauderdale, Florida 33301, hereby enters its Order based on the following findings of fact and conclusions of law. Please be advised that this Order shall constitute a lien on your property.

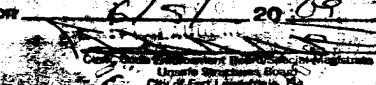
1. That the violation(s) of the City of Fort Lauderdale Code of Ordinances occurred on the following described real property situate, lying and being in Broward County, Florida, to wit:

Folio: 9233041660

Legal: LAUDERDALE MANORS AMD PLAT 28-11 B LOT 25 E 40, 26 W 40 BLK 6

More commonly known as: 1506 NW 13 CT

2. That the Special Magistrate did issue on the 26th day of January 2009, a Final Order in the above captioned case commanding the above name respondents(s) to bring the violations specified in said Final Order into compliance on or before the 25th day of February 2009, or pay a fine in the amount of \$100.00 per day for the violation of ordinance 28-33(a) for each day of non-compliance thereafter.
3. That the respondent(s) did not comply with the Final Order on or before the date specified therein as evidenced by the Inspector filing an executed Affidavit of Non-Compliance with the Special Magistrate
4. It is the order of the Special Magistrate that the fine specified in said Final Order is hereby confirmed and ratified, and shall accrue at the per diem specified until such time as the above named Respondent(s) shall comply with said Final Order, plus the recovery of reasonable attorney's fees in any foreclosure of the lien.
5. The City shall record a certified copy of this Order in the Public Records of Broward County. Once recorded, this Order shall constitute a lien on the subject property as well as on any other real or personal property owned by the Respondent.

I certify this document to be a true and correct copy of the original,
WITNESS MY HAND AND SEAL
 ON 6/15/09 2009


 Special Magistrate
 City of Fort Lauderdale, Fla.

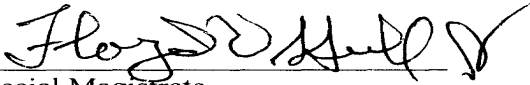
(7)

Case No: CE08101711
Property: 1506 NW 13 CT

LIEN AND FORECLOSURE NOTICE:

Please be advised that this lien shall be recorded in the public records for Broward County and may be foreclosed by the City of Fort Lauderdale if not paid in full within ninety days.

DONE AND ORDERED this 27th day of April, 2009.


Special Magistrate

ATTEST:


Clerk, Special Magistrate

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements, personally appeared Floyd V. Hull, Special Magistrate, known to me to be the person described therein and who executed the foregoing instrument and acknowledged before me that he executed same, and who did (did not) take an Oath.

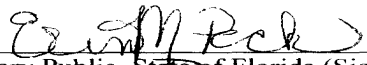
STATE OF FLORIDA:
COUNTY OF BROWARD:

The foregoing instrument was acknowledged before me this 30 day of April 2009, by Floyd V. Hull, as Special Magistrate and Brian McKelligett as Clerk, of the City of Ft. Lauderdale Special Magistrate proceedings. Who are personally known to me or have produced _____ as identification.

(SEAL)



ERIN M. PECK
MY COMMISSION # DD 745297
EXPIRES: December 30, 2011
Bonded Third Budget Notary Services


Notary Public, State of Florida (Signature
of Notary taking Acknowledgment)

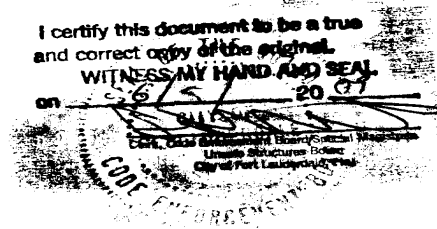
Name of Notary Typed, Printed or Stamped

My Commission Expires: _____

Commission Number: _____

This instrument prepared by:
Code Enforcement Division
Building Department
City of Fort Lauderdale
700 NW 19th Avenue
Fort Lauderdale, FL 33311

Return to:
Erin M. Peck
Code Enforcement Division
City of Fort Lauderdale
700 Northwest 19th Avenue
Fort Lauderdale, Florida 33311
(954) 828-5327



16

**ORDER IMPOSING A FINE
AND CIVIL PENALTY**

SPECIAL MAGISTRATE
CITY OF FORT LAUDERDALE, FLORIDA

Space Reserved for Recording Information

CITY OF FORT LAUDERDALE
Petitioner,

CASE NO. CT08120396

v.

WILLIAMS, CAROLYN L
Respondent(s)

That pursuant to Chapter 11 of the Code of Ordinances of the City of Fort Lauderdale, the City of Fort Lauderdale Special Magistrate, 100 North Andrews Avenue, Fort Lauderdale, Florida 33301, hereby enters its Order based on the following findings of fact and conclusions of law. Please be advised that this Order shall constitute a lien on your property.

- 1. That the violation(s) of the City of Fort Lauderdale Code of Ordinances occurred on the following described real property situate, lying and being in Broward County, Florida, to wit:

Folio: 0212030080

Legal: REVISED PLAT OF BLK 4 IDLEWYLD 15-20 B LOT 11 BLK 4

More commonly known as: 2601 ACACIA CT

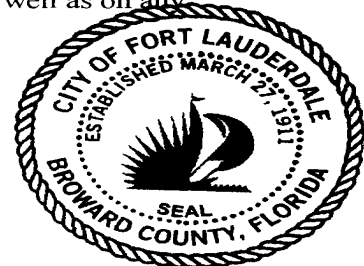
- 2. That the Special Magistrate did issue on the 5th day of March 2009, a Final Order in the above captioned case commanding the above named respondent(s) to bring the violations specified in said Final Order into compliance on or before the 19th day of March 2009, or pay a fine in the amount of \$25.00 per day for the violation of ordinance 18-27(a) for each day of non-compliance thereafter.
- 3. That the respondent(s) did not comply with the Final Order on or before the date specified therein as evidenced by the Inspector filing an executed Affidavit of Non-Compliance with the Special Magistrate. The respondent did comply with the Special Magistrate's Order on the 9th day of July 2009. The Special Magistrate on the 18th day of March 2010 did impose a fine in the amount of \$2,775.00 plus the Civil Penalty of \$200.00 totaling \$2,975.00.
- 4. It is the order of the Special Magistrate that the fine specified in said Final Order is hereby confirmed and ratified, plus the recovery of reasonable attorney's fees in any foreclosure of the lien.
- 5. The City shall record a certified copy of this Order in the Public Records of Broward County. Once recorded, this Order shall constitute a lien on the subject property as well as on any other real or personal property owned by the Respondent.

Page 1 of 2

I certify this document to be a true
and correct copy of the original.

WITNESS MY HAND AND SEAL

on 11/26/10 20 10
[Signature]
Clerk, Code Enforcement Board/Special Magistrate
Unsafe Structures Board
City of Fort Lauderdale, Fla.



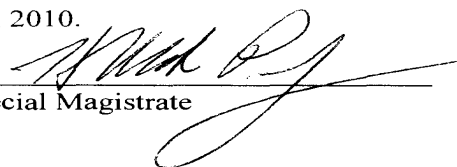
7

Case No: CT08120396
Property: 2601 ACACIA CT

LIEN AND FORECLOSURE NOTICE:

Please be advised that this lien shall be recorded in the public records for Broward County and may be foreclosed by the City of Fort Lauderdale if not paid in full within ninety days.

DONE AND ORDERED this 18th day of March, 2010.


Special Magistrate

ATTEST:


Clerk, Special Magistrate

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements, personally appeared H. Mark Purdy, Special Magistrate, known to me to be the person described therein and who executed the foregoing instrument and acknowledged before me that he executed same, and who did (did not) take an Oath.

STATE OF FLORIDA:
COUNTY OF BROWARD:

The foregoing instrument was acknowledged before me this 24 day of March 2010, by H. Mark Purdy, as Special Magistrate and Brian McKelligett as Clerk, of the City of Ft. Lauderdale Special Magistrate proceedings. Who are personally known to me or have produced _____ as identification.

(SEAL)


Notary Public, State of Florida (Signature of Notary taking Acknowledgment)



ERIN M. PECK
MY COMMISSION # DD 745297
EXPIRES: December 30, 2011
Bonded Thru Budget Notary Services

Name of Notary Typed, Printed or Stamped

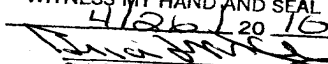
My Commission Expires: _____

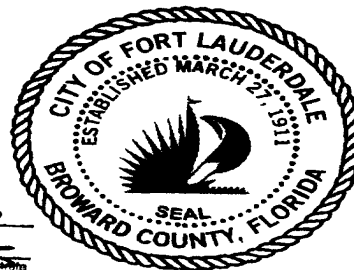
Commission Number: _____

This instrument prepared by:
Code Enforcement Division
Building Department
City of Fort Lauderdale
700 NW 19th Avenue
Fort Lauderdale, FL 33311

Return to:
Erin M. Peck
Code Enforcement Division
City of Fort Lauderdale
700 Northwest 19th Avenue
Fort Lauderdale, Florida 33311
(954) 828-5327

I certify this document to be a true and correct copy of the original.

WITNESS MY HAND AND SEAL
on 4/26/10

Clerk, Code Enforcement Board/Special Magistrate
Unsafe Structures Board
City of Fort Lauderdale, Fla.



59

ORDER IMPOSING A FINE

SPECIAL MAGISTRATE
CITY OF FORT LAUDERDALE, FLORIDA

Space Reserved for Recording Information

CITY OF FORT LAUDERDALE
Petitioner,

CASE NO. CE10080592

v.

WILLIAMS, CAROLYN L
Respondent(s)

That pursuant to Chapter 11 of the Code of Ordinances of the City of Fort Lauderdale, the City of Fort Lauderdale Special Magistrate, 100 North Andrews Avenue, Fort Lauderdale, Florida 33301, hereby enters its Order based on the following findings of fact and conclusions of law. Please be advised that this Order shall constitute a lien on your property.

- 1. That the violation(s) of the City of Fort Lauderdale Code of Ordinances occurred on the following described real property situate, lying and being in Broward County, Florida, to wit:

Folio: 0212030080

Legal: REVISED PLAT OF BLK 4 IDLEWYLD 15-20 B LOT 11 BLK 4

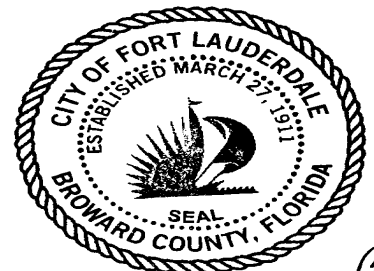
More commonly known as: 2601 ACACIA CT

- 2. That the Special Magistrate did issue on the 7th day of October 2010, a Final Order in the above captioned case commanding the above named respondent(s) to bring the violations specified in said Final Order into compliance on or before the 21st day of October 2010, or pay a fine in the amount of \$50.00 per day for the violation of ordinance 18-1. for each day of non-compliance thereafter.
- 3. That the respondent(s) did not comply with the Final Order on or before the date specified therein as evidenced by the Inspector filing an executed Affidavit of Non-Compliance with the Special Magistrate. The respondent did comply with the Special Magistrate's Order on the 23rd day of November 2010. The Special Magistrate on the 2nd day of December 2010 did impose a fine in the amount of \$1,600.00.
- 4. It is the order of the Special Magistrate that the fine specified in said Final Order is hereby confirmed and ratified, plus the recovery of reasonable attorney's fees in any foreclosure of the lien.
- 5. The City shall record a certified copy of this Order in the Public Records of Broward County. Once recorded, this Order shall constitute a lien on the subject property as well as on any other real or personal property owned by the Respondent.

I certify this document to be a true and correct copy of the original.
WITNESS MY HAND AND SEAL

on 11/5/11 20 11

[Signature]
Clerk, Code Enforcement Board/Special Magistrate
Unsafe Structures Board
City of Fort Lauderdale, Fla.




2

Case No: CE10080592
Property: 2601 ACACIA CT

LIEN AND FORECLOSURE NOTICE:

Please be advised that this lien shall be recorded in the public records for Broward County and may be foreclosed by the City of Fort Lauderdale if not paid in full within ninety days.

DONE AND ORDERED this 2nd day of December, 2010.


Special Magistrate

ATTEST:


Clerk, Special Magistrate

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements, personally appeared Rose-Ann Flynn, Special Magistrate, known to me to be the person described therein and who executed the foregoing instrument and acknowledged before me that he executed same, and who did (did not) take an Oath.


STATE OF FLORIDA:
COUNTY OF BROWARD:

The foregoing instrument was acknowledged before me this 6 day of December 2010, by Dee Paris as Clerk and Rose-Ann Flynn as Special Magistrate for the City of Fort Lauderdale, who are personally known to me or have produced _____ as identification.

(SEAL)



ERIN M. PECK
MY COMMISSION # DD 745297
EXPIRES: December 30, 2011
Bonded Thru Budget Notary Services


Notary Public, State of Florida (Signature of Notary taking Acknowledgment)


Name of Notary Typed, Printed or Stamped

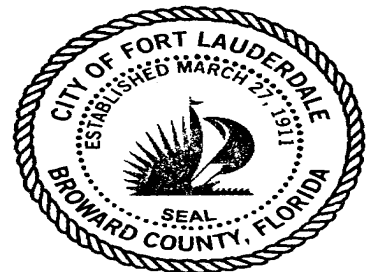
My Commission Expires: _____

Commission Number: _____

This instrument prepared by:
Code Enforcement Division
Building Department
City of Fort Lauderdale
700 NW 19th Avenue
Fort Lauderdale, FL 33311

Return to:
Erin M. Peck
Code Enforcement Division
City of Fort Lauderdale
700 Northwest 19th Avenue
Fort Lauderdale, Florida 33311
(954) 828-5327

I certify this document to be a true and correct copy of the original.
WITNESS MY HAND AND SEAL
on 11 5 20 11

Clerk, Code Enforcement Board/Special Magistrate
Unsafe Structures Board
City of Fort Lauderdale, Fla.



17

ORDER IMPOSING A FINE

SPECIAL MAGISTRATE
CITY OF FORT LAUDERDALE, FLORIDA

Space Reserved for Recording Information

CITY OF FORT LAUDERDALE
Petitioner,

CASE NO. CE08051427

v.

WILLIAMS, CAROLYN L
Respondent(s)

That pursuant to Chapter 11 of the Code of Ordinances of the City of Fort Lauderdale, the City of Fort Lauderdale Special Magistrate, 100 North Andrews Avenue, Fort Lauderdale, Florida 33301, hereby enters its Order based on the following findings of fact and conclusions of law. Please be advised that this Order shall constitute a lien on your property.

- 1. That the violation(s) of the City of Fort Lauderdale Code of Ordinances occurred on the following described real property situate, lying and being in Broward County, Florida, to wit:

Folio: 0212030080

Legal: REVISED PLAT OF BLK 4 IDLEWYLD 15-20 B LOT 11 BLK 4

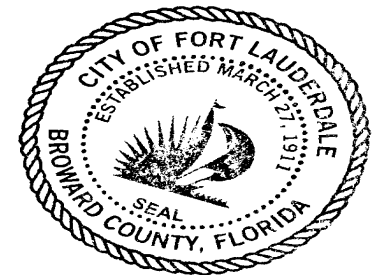
More commonly known as: 2601 ACACIA CT

- 2. That the Special Magistrate did issue on the 7th day of August 2008, a Final Order in the above captioned case commanding the above named respondent(s) to bring the violations specified in said Final Order into compliance on or before the 21st day of August 2008, or pay a fine in the amount of \$50.00 per day for the violation of ordinance 18-27(a), \$50.00 per day for the violation of ordinance 9-305(a) and \$50.00 per day for the violation of ordinance 9-306 for each day of non-compliance thereafter.
- 3. That the respondent(s) did not comply with the Final Order on or before the date specified therein as evidenced by the Inspector filing an executed Affidavit of Non-Compliance with the Special Magistrate. The respondent did comply with the Special Magistrate's Order on the 2nd day of October 2008. The Special Magistrate on the 16th day of December 2010 did impose a fine in the amount of \$3,350.00.
- 4. It is the order of the Special Magistrate that the fine specified in said Final Order is hereby confirmed and ratified, plus the recovery of reasonable attorney's fees in any foreclosure of the lien.
- 5. The City shall record a certified copy of this Order in the Public Records of Broward County. Once recorded, this Order shall constitute a lien on the subject property as well as on any other real or personal property owned by the Respondent.

I certify this document to be a true
and correct copy of the original.
WITNESS MY HAND AND SEAL

on 11/21/2011


Clerk, Code Enforcement Board/Special Magistrate
Unstaffed Structures Board
City of Fort Lauderdale, Fla.



2

Case No: CE08051427
Property: 2601 ACACIA CT

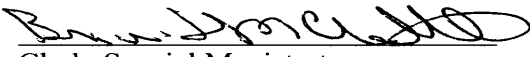
LIEN AND FORECLOSURE NOTICE:

Please be advised that this lien shall be recorded in the public records for Broward County and may be foreclosed by the City of Fort Lauderdale if not paid in full within ninety days.

DONE AND ORDERED this 16th day of December, 2010.


Special Magistrate

ATTEST:


Clerk, Special Magistrate

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements, personally appeared Meah Tell, Special Magistrate, known to me to be the person described therein and who executed the foregoing instrument and acknowledged before me that he executed same, and who did (did not) take an Oath.

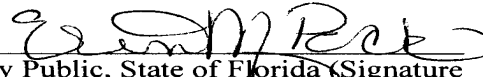
STATE OF FLORIDA:
COUNTY OF BROWARD:

The foregoing instrument was acknowledged before me this 21 day of December 2010, by Brian McKelligett as Clerk and Meah Tell as Special Magistrate for the City of Fort Lauderdale, who are personally known to me or have produced _____ as identification.

(SEAL)



ERIN M. PECK
MY COMMISSION # DD 745297
EXPIRES: December 30, 2011
Bonded Thru Budget Notary Services


Notary Public, State of Florida (Signature of Notary taking Acknowledgment)

Name of Notary Typed, Printed or Stamped

My Commission Expires: _____

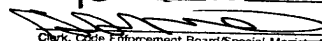
Commission Number: _____

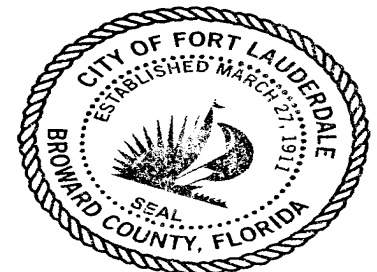
This instrument prepared by:
Code Enforcement Division
Building Department
City of Fort Lauderdale
700 NW 19th Avenue
Fort Lauderdale, FL 33311

Return to:
Erin M. Peck
Code Enforcement Division
City of Fort Lauderdale
700 Northwest 19th Avenue
Fort Lauderdale, Florida 33311
(954) 828-5327

I certify this document to be a true and correct copy of the original.

WITNESS MY HAND AND SEAL
on 12/16 2010


Clerk, Code Enforcement Board/Special Magistrate
Unsafe Structures Board
City of Fort Lauderdale, Fla.



20

ORDER IMPOSING A FINE

SPECIAL MAGISTRATE
CITY OF FORT LAUDERDALE, FLORIDA

Space Reserved for Recording Information

CITY OF FORT LAUDERDALE
Petitioner,

CASE NO. CE11011892

v.

WILLIAMS, CAROLYN L EST
Respondent(s)

That pursuant to Chapter 11 of the Code of Ordinances of the City of Fort Lauderdale, the City of Fort Lauderdale Special Magistrate, 100 North Andrews Avenue, Fort Lauderdale, Florida 33301, hereby enters its Order based on the following findings of fact and conclusions of law. Please be advised that this Order shall constitute a lien on your property.

1. That the violation(s) of the City of Fort Lauderdale Code of Ordinances occurred on the following described real property situate, lying and being in Broward County, Florida, to wit:

Folio: 0212030080

Legal: REVISED PLAT OF BLK 4 IDLEWYLD 15-20 B LOT 11 BLK 4

More commonly known as: 2601 ACACIA CT

2. That the Special Magistrate did issue on the 21st day of April 2011, a Final Order in the above captioned case commanding the above name respondents(s) to bring the violations specified in said Final Order into compliance on or before the 5th day of May 2011, or pay a fine in the amount of \$50.00 per day for the violation of ordinance 9-280(b) and \$50.00 per day for the violation of ordinance 9-306 for each day of non-compliance thereafter.
3. That the respondent(s) did not comply with the Final Order on or before the date specified therein as evidenced by the Inspector filing an executed Affidavit of Non-Compliance with the Special Magistrate. The Special Magistrate on the 16th day of June 2011 did impose a fine in the amount of \$4,100.00, which will continue to accrue.
4. It is the order of the Special Magistrate that the fine specified in said Final Order is hereby confirmed and ratified, and shall accrue at the per diem specified until such time as the above named Respondent(s) shall comply with said Final Order, plus the recovery of reasonable attorney's fees in any foreclosure of the lien.
5. The City shall record a certified copy of this Order in the Public Records of Broward County. Once recorded, this Order shall constitute a lien on the subject property as well as on any other real or personal property owned by the Respondent.

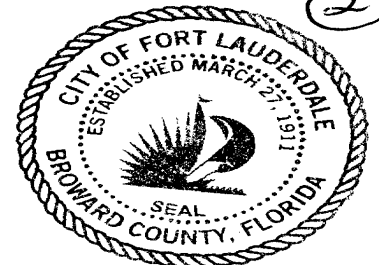
Page 1 of 2

I certify this document to be a true and correct copy of the original.

WITNESS MY HAND AND SEAL

on July 21 2011

Clerk, Code Enforcement Board/Special Magistrate
Unsafe Structures Board
City of Fort Lauderdale, Fla.

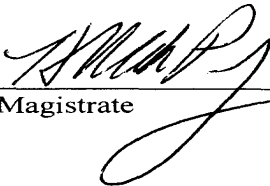


Case No: CE11011892
Property: 2601 ACACIA CT

LIEN AND FORECLOSURE NOTICE:

Please be advised that this lien shall be recorded in the public records for Broward County and may be foreclosed by the City of Fort Lauderdale if not paid in full within ninety days.

DONE AND ORDERED this 16th day of June, 2011.


Special Magistrate

ATTEST:


Clerk, Special Magistrate

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements, personally appeared H. Mark Purdy, Special Magistrate, known to me to be the person described therein and who executed the foregoing instrument and acknowledged before me that he executed same, and who did (did not) take an Oath.

STATE OF FLORIDA:
COUNTY OF BROWARD:

The foregoing instrument was acknowledged before me this 21 day of June 2011, by Dee Paris as Clerk and H. Mark Purdy as Special Magistrate for the City of Fort Lauderdale, who are personally known to me or have produced _____ as identification.

(SEAL)



ERIN M. PECK
MY COMMISSION # DD 745297
EXPIRES: December 30, 2011
Bonded Thru Budget Notary Service


Notary Public, State of Florida (Signature of Notary taking Acknowledgment)

Name of Notary Typed, Printed or Stamped

My Commission Expires: _____

Commission Number: _____

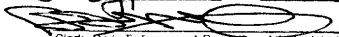
This instrument prepared by:
Code Enforcement Division
Building Department
City of Fort Lauderdale
700 NW 19th Avenue
Fort Lauderdale, FL 33311

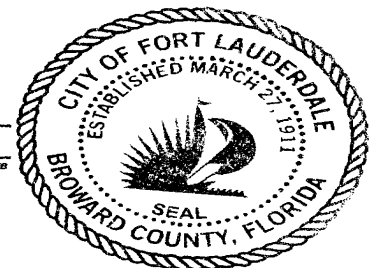
Return to:
Erin M. Peck
Code Enforcement Division
City of Fort Lauderdale
700 Northwest 19th Avenue
Fort Lauderdale, Florida 33311
(954) 828-5327

I certify this document to be a true and correct copy of the original.

WITNESS MY HAND AND SEAL

on July 21 20 11


Clerk, Code Enforcement Board/Special Magistrate
Unseal Structures Board
City of Fort Lauderdale, Fla.



13

ORDER IMPOSING A FINE

SPECIAL MAGISTRATE
CITY OF FORT LAUDERDALE, FLORIDA

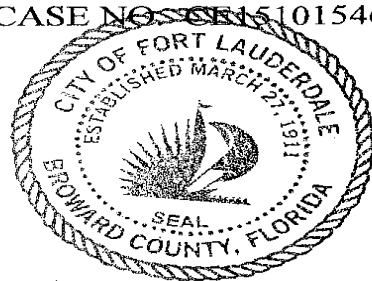
Space Reserved Recording Information

CITY OF FORT LAUDERDALE
Petitioner,

CASE NO. ~~SC15~~ 15101546

v.

WILLIAMS, CAROLYN L EST
Respondent(s)



That pursuant to Chapter 11 of the Code of Ordinances of the City of Fort Lauderdale, the City of Fort Lauderdale Special Magistrate, 100 North Andrews Avenue, Fort Lauderdale, Florida 33301, hereby enters its Order based on the following findings of fact and conclusions of law. Please be advised that this Order shall constitute a lien on your property.


1. That the violation(s) of the City of Fort Lauderdale Code of Ordinances occurred on the following described real property situate, lying and being in Broward County, Florida, to wit:

Folio: 0212030080

Legal: REVISED PLAT OF BLK 4 IDLEWYLD 15-20 B LOT 11 BLK 4

More commonly known as: 2601 ACACIA CT

2. That the Special Magistrate did issue on the 3rd day of March 2016, a Final Order in the above captioned case commanding the above name respondents(s) to bring the violations specified in said Final Order into compliance on or before the 7th day of April 2016 or pay a fine in the amount of \$100.00 per day for the violation of 9-308 (a).
3. On May 19, 2016, the Special Magistrate found that the respondent(s) did not comply with the Final Order and any subsequent orders on or before the date specified therein, based on the testimony and evidence as presented. The Special Magistrate, on the 19th day of May 2016, did impose a fine in the amount of \$4,100.00 which continues to accrue.
4. It is the order of the Special Magistrate that the fine specified in said Final Order is hereby confirmed and ratified, plus the recovery of reasonable attorney's fees in any foreclosure of the lien.
5. The City shall record a certified copy of this Order in the Public Records of Broward County. Once recorded, this Order shall constitute a lien on the subject property as well as on any other real or personal property owned by the Respondent.

I certify this document to be a true
and correct copy of the original.
WITNESS MY HAND AND SEAL
on 8/26 2016

City of Fort Lauderdale, Fla.

2

Case No: CE15101546
Property: 2601 ACACIA CT

LIEN AND FORECLOSURE NOTICE:

Please be advised that this lien shall be recorded in the public records for Broward County and may be foreclosed by the City of Fort Lauderdale if not paid in full within ninety days.

DONE AND ORDERED this 19th day of May 2016.

ATTEST:

Clerk, Special Magistrate

Special Magistrate

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements, personally appeared Mark Purdy, Special Magistrate, known to me to be the person described therein and who executed the foregoing instrument and acknowledged before me that he executed same, and who did (did not) take an Oath.

STATE OF FLORIDA:
COUNTY OF BROWARD:

The foregoing instrument was acknowledged before me this 25 day of May 2016, by Porshia Goldwire as Clerk and Mark Purdy as Special Magistrate for the City of Fort Lauderdale, who are personally known to me or have produced N/A as identification.

(SEAL)



DEANNA BOJMAN
MY COMMISSION # FF 170704
EXPIRES: October 31, 2018
Bonded Thru Budget Notary Services

Notary Public, State of Florida
(Signature of Notary taking Acknowledgment)

Name of Notary Typed, Printed or Stamped

My Commission Expires: _____

Commission Number: _____

This instrument prepared by and returns to:

Geneva Williams
Code Enforcement Division
Department of Sustainable Development
City of Fort Lauderdale
700 NW 19th Avenue
Fort Lauderdale, FL 33311
(954) 828-5256

I certify this document to be a true and correct copy of the original.
WITNESS MY HAND AND SEAL
ON 2/26 2016

Clerk, Code Enforcement, City of Fort Lauderdale, Fla.

9

CLAIM OF LIEN
MEMORIAL REGIONAL HOSPITAL
Interim

STATE OF FLORIDA

COUNTY OF BROWARD

M/R # 1662918

Jessica Chacon-Chang 2900 Corporate Way, Miramar, Florida, being sworn says that he/she is the authorized representative of MEMORIAL REGIONAL HOSPITAL

That MEMORIAL REGIONAL HOSPITAL has furnished care, treatment and maintenance to Carol Angela Williams at MEMORIAL REGIONAL HOSPITAL located at 3501 JOHNSON ST HOLLYWOOD, Florida 33021. That Carol Angela Williams was admitted to MEMORIAL REGIONAL HOSPITAL on the 8th day of August, 2020. and was thereafter cared for, treated and maintained by MEMORIAL REGIONAL HOSPITAL and including 9th day of August, 2020. That there is now due and owing to MEMORIAL REGIONAL HOSPITAL the sum of \$ 21,908.00. That to the best knowledge and belief of the Affiant, the following are liable for the sum due and owing to MEMORIAL REGIONAL HOSPITAL for the injuries and illness of Carol Angela Williams.

Responsible Party
Carol Angela Williams
8990 S HOLLYBRK BLVD APT 303
PEMBROKE PINES, FL 33025-1356

Name/Address of Tort-Feasor

Name/Address of Patient's Ins **If known (Auto)** **Name/Address of Tort-Feasor Insurance If Known**
MOTOR VEHICLE ACCIDENT

That a copy of this document has been sent by registered mail to each of the above listed. That the amount now due and unpaid is just, reasonable, and excluding Homestead Property, MEMORIAL REGIONAL HOSPITAL does hereby claim lien upon all causes of action, suits, claims, counterclaims, and demands accruing to Carol Angela Williams. And upon all judgements, settlements and settlement agreements in which necessitated or shall have necessitated such hospital care, treatment, and maintenance as furnished to said Carol Angela Williams.

Jessica Chacon-Chang
Jessica Chacon-Chang
Manager, Collections & Patient Financial Services

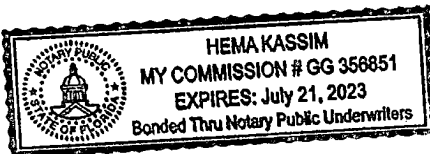
Memorial Regional Hospital, 2900 Corporate Way, Miramar, FL 33025, prepared by:

Latoya Tarifeno
Latoya Tarifeno

Sworn to and subscribed before me on 12th day of August, 2020.

M. Kassim
Notary Public

Letter ID Number: 36741 HAR: 5019573119



1

ORDER IMPOSING A FINE

SPECIAL MAGISTRATE
CITY OF FORT LAUDERDALE, FLORIDA

Space Reserved Recording Information

CITY OF FORT LAUDERDALE
Petitioner,

CASE NO. CE19090719

vs.

WILLIAMS, CAROLYN L EST
% HELEN PEARL WILLIAMS
Respondent(s)

That pursuant to Chapter 11 of the Code of Ordinances of the City of Fort Lauderdale, the City of Fort Lauderdale Special Magistrate, 100 North Andrews Avenue, Fort Lauderdale, Florida 33301, hereby enters its Order based on the following findings of fact and conclusions of law. Please be advised that this Order shall constitute a lien on your property.

1. That the violation(s) of the City of Fort Lauderdale Code of Ordinances occurred on the following described real property situate, lying and being in Broward County, Florida, to wit:

Folio: 504212030080

Legal: REVISED PLAT OF BLK 4 IDLEWYLD 15-20 B LOT 11 BLK 4

More commonly known as: 2601 ACACIA CT

2. That the Special Magistrate did issue on the 5th day of December 2019, a Final Order in the above captioned case commanding the above name respondents(s) to bring the violations specified in said Final Order into compliance on or before the 9th day of January 2020, or pay a fine in the amount of \$100.00 per day for the violations of 9-280(b), 9-306 and 9-308(b).
3. On March 5, 2020, the Special Magistrate found that the respondent(s) did not comply with the Final Order and any subsequent orders on or before the date specified therein, based on the testimony and evidence as presented. The Special Magistrate, on the 5th day of March 2020, did impose a fine in the amount of \$16,800.00 which continues to accrue.
4. It is the order of the Special Magistrate that the fine specified in said Final Order is hereby confirmed and ratified, plus the recovery of reasonable attorney's fees in any foreclosure of the lien.
5. The City shall record a certified copy of this Order in the Public Records of Broward County 30 days from the above date of the Special Magistrate Hearing. Once recorded, this Order shall constitute a lien on the subject property as well as on any other real or personal property owned by the Respondent.

Case No: CE19090719
Property: 2601 ACACIA CT

LIEN AND FORECLOSURE NOTICE:

Please be advised that this lien shall be recorded in the public records for Broward County and may be foreclosed by the City of Fort Lauderdale if not paid in full within ninety days.

DONE AND ORDERED this 5th day of March 2020.

ATTEST:



Clerk, Special Magistrate

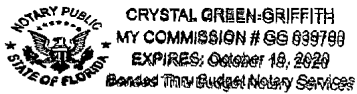


Special Magistrate

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements, personally appeared Mark Purdy, Special Magistrate, known to me to be the person described therein and who executed the foregoing instrument and acknowledged before me that he executed same, and who did (did not) take an Oath.

STATE OF FLORIDA:
COUNTY OF BROWARD:

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this 12th day of March 2020, by Mark Purdy, as Special Magistrate, of the City of Fort Lauderdale, and Katrina Jordan, as Clerk of the Special Magistrate for the City of Fort Lauderdale.





(Signature of Notary Public, State of Florida)

(Printed, Typed, or Stamped Commissioned Name of Notary)

Personally Known OR Produced Identification _____

Type of Identification Produced _____

This instrument prepared by and returns to:

Crystal Green-Griffith
Code Enforcement Division
Department of Sustainable Development
City of Fort Lauderdale
700 NW 19th Avenue
Fort Lauderdale, FL 33311
(954) 828-4608

DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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

WILLIAMS, CAROLYN L EST % HELEN PEARL WILLIAMS
2601 ACACIA COURT
FORT LAUDERDALE, FL 33301

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 535 NW 23 AVE, FL IS BEING SCHEDULED FOR TAX DEED AUCTION. ONCE THE PROPERTY IS SOLD, UNPAID TAXES CAN NO LONGER 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 OTHER 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 NOTICE.

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

AMOUNTS SHOWN BELOW ARE ESTIMATED AMOUNTS DUE WHICH MAY BE SUBJECT TO ADDITIONAL FEES. PLEASE CALL (954) 357-5374 FOR THE CORRECT AMOUNT DUE PRIOR TO SUBMITTING ANY PAYMENT TO REDEEM UNPAID TAXES AND REMOVE THE PROPERTY FROM AUCTION.

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

- * Estimated Amount due if paid by April 30, 2021\$8,442.31
- Or
- * Estimated Amount due if paid by May 18, 2021\$8,530.78

THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON May 19, 2021 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

DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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

WILLIAMS, CAROLYN L EST % HELEN PEARL WILLIAMS
3310 ALHAMBRA CIR
HAMPTON GA 30228-3633

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 535 NW 23 AVE, FL IS BEING SCHEDULED FOR TAX DEED AUCTION. ONCE THE PROPERTY IS SOLD, UNPAID TAXES CAN NO LONGER BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW, PLEASE CALL FOR MORE INFORMATION.

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www.broward.org/recordstaxestreasury

DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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

CALVIN WILLIAMS
535 NW 23RD AVE
FORT LAUDERDALE, FL 33311-7723

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 535 NW 23 AVE, FL IS BEING SCHEDULED FOR TAX DEED AUCTION. ONCE THE PROPERTY IS SOLD, UNPAID TAXES CAN NO LONGER BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW, PLEASE CALL FOR MORE INFORMATION.

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

- * Estimated Amount due if paid by April 30, 2021\$7,965.31
- Or
- * Estimated Amount due if paid by May 18, 2021\$8,053.78

THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON May 19, 2021 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

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www.broward.org/recordstaxestreasury

DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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

BROWARD COUNTY, CLERK OF THE CIRCUIT COURT
201 SE 6TH ST RM 18150
FT LAUDERDALE, FL 33301-3303

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 535 NW 23 AVE, FL IS BEING SCHEDULED FOR TAX DEED AUCTION. ONCE THE PROPERTY IS SOLD, UNPAID TAXES CAN NO LONGER BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW, PLEASE CALL FOR MORE INFORMATION.

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

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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

DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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

CACH, LLC
4340 S MONACO, SECOND FLOOR
DENVER, CO 80237

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 535 NW 23 AVE, FL IS BEING SCHEDULED FOR TAX DEED AUCTION. ONCE THE PROPERTY IS SOLD, UNPAID TAXES CAN NO LONGER BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW, PLEASE CALL FOR MORE INFORMATION.

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

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- * Estimated Amount due if paid by May 18, 2021\$8,053.78

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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

DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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

CITY OF FORT LAUDERDALE, CODE ENFORCEMENT DIVISION
700 NORTHWEST 19TH AVENUE
FORT LAUDERDALE, FL 33311

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 535 NW 23 AVE, FL IS BEING SCHEDULED FOR TAX DEED AUCTION. ONCE THE PROPERTY IS SOLD, UNPAID TAXES CAN NO LONGER BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW, PLEASE CALL FOR MORE INFORMATION.

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

- * Estimated Amount due if paid by April 30, 2021\$7,965.31
- Or
- * Estimated Amount due if paid by May 18, 2021\$8,053.78

THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON May 19, 2021 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

DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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

CITY OF FORT LAUDERDALE, CODE ENFORCEMENT DIVISION, BUILDING DEPARTMENT
700 NW 19TH AVENUE
FORT LAUDERDALE, FL 33311

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 535 NW 23 AVE, FL IS BEING SCHEDULED FOR TAX DEED AUCTION. ONCE THE PROPERTY IS SOLD, UNPAID TAXES CAN NO LONGER BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW, PLEASE CALL FOR MORE INFORMATION.

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

- * Estimated Amount due if paid by April 30, 2021\$7,965.31
- Or
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THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON May 19, 2021 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

DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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

CITY OF FORT LAUDERDALE, CODE ENFORCEMENT DIVISION, DEPARTMENT OF
SUSTAINABLE DEVELOPMENT
700 NW 19TH AVENUE
FORT LAUDERDALE, FL 33311

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 535 NW 23 AVE, FL IS BEING SCHEDULED FOR TAX DEED AUCTION. ONCE THE PROPERTY IS SOLD, UNPAID TAXES CAN NO LONGER BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW, PLEASE CALL FOR MORE INFORMATION.

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

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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: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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

CITY OF FORT LAUDERDALE, FINANCE DEPARTMENT
100 NORTH ANDREWS AVENUE
FORT LAUDERDALE, FL 33301

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

- * Estimated Amount due if paid by April 30, 2021\$7,965.31
- Or
- * Estimated Amount due if paid by May 18, 2021\$8,053.78

THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON May 19, 2021 UNLESS ALL BACK TAXES ARE PAID PRIOR TO AUCTION.

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

DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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CITY OF FORT LAUDERDALE, SPECIAL MAGISTRATE
100 NORTH ANDREWS AVENUE
FORT LAUDERDALE, FL 33301

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DISCOVER BANK, ISSUER OF THE DISCOVER CARD
210 SYLVAN AVENUE
ENGLEWOOD CLIFFS, NJ 07632

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JESSICA CHACON-CHANG, AUTHORIZED REPRESENTATIVE OF MEMORIAL REGIONAL HOSPITAL
2900 CORPORATE WAY
MIRAMAR, FL 33025

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MEMORIAL REGIONAL HOSPITAL
3501 JOHNSON ST
HOLLYWOOD, FL 33021

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MIDLAND FUNDING LLC
PO BOX 290335
TAMPA, FL 33687

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PROGRESSIVE SELECT INSURANCE COMPANY, AS SUBROGEE FOR JAMES L. FENNELL
P.O. BOX 89480
CLEVELAND, OH 44101

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STEPHEN H. BUTTER, ESQUIRE
TURNBERRY PLAZA PENTHOUSE,
2875 NORTHEAST 191 STREET
AVENTURA, FL 33180

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*CITY OF FORT LAUDERDALE
100 N ANDREWS AVE
FORT LAUDERDALE, FL 33301-1016

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*FREEMAN, ANTHONY & ANNETTE
541 NW 23RD AVE
FT LAUDERDALE, FL 33311-7723

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*MONTANA, ANDERSON
529 NW 23RD AVE
FORT LAUDERDALE, FL 33311-7723

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CALVIN WILLIAMS
16501 NW 18 AVE
MIAMI, FL 33054

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CAROL ANGELA WILLIAMS
8990 S HOLLYBROOK BLVD APT 303
PEMBROKE PINES, FL 33025-1356

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CAROL S WILLIAMS
1146 NW 17TH AVE
FT LAUDERDALE, FL 33311-5858

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

- * Estimated Amount due if paid by April 30, 2021\$7,965.31
- Or
- * Estimated Amount due if paid by May 18, 2021\$8,053.78

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

DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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

CAROL WILLIAMS
5610 MAYO ST
HOLLYWOOD, FL 33023-2328

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DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

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CAROL WILLIAMS
2300 SW 83RD TER
MIRAMAR, FL 33025-5130

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CAROL WILLIAMS
1506 NW 13TH CT
FT LAUDERDALE, FL 33311-5370

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DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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CAROLYN WILLIAMS
535 NW 23RD AVE
FORT LAUDERDALE, FL 33311-7723

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

DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

WARNING

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CITY OF FORT LAUDERDALE
ATTN: CITY ATTORNEY OFFICE
100 N ANDREWS AVE 7TH FLOOR
FORT LAUDERDALE, FL 33301

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DATE: April 1st, 2021
PROPERTY ID # 504205-07-1230 (TD # 43398)

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LAW OFFICES OF ANDREU, PALMA & ANDREU, PL
701 SW 27TH AVE STE 900
MIAMI, FL 33135-3000

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DATE: April 1st, 2021
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MARC J TANNEN ESQ
633 S ANDREWS AVE STE 500
FT LAUDERDALE, FL 33301-2858

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MARC J TANNEN ESQ
3616 NW 24TH AVE
BOCA RATON, FL 33431-5407

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STEVEN J JACOBSON ESQ
LAW OFFICES OF STEVEN J JACOBSON, P.A.
5701 N PINE ISLAND RD, STE 320
FT LAUDERDALE, FL 33321

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WILLIAMS, CALVIN J
2910 NW 2ND ST
FT LAUDERDALE, FL 33311-8508

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WILLIAMS, CALVIN L
301 SW 14TH ST
FT LAUDERDALE, FL 33315-1533

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| <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 | \$ _____ |

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Total Po

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Sent To

Street or

City, Sta.

TD 43398 MAY 2021 WARNING
CALVIN WILLIAMS
535 NW 23RD AVE
FORT LAUDERDALE, FL 33311-7723

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

See Reverse for Instructions

7017 2680 0000 4978 7163

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<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
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TD 43398 MAY 2021 WARNING

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WILLIAMS, CALVIN J

Str

2910 NW 2ND ST

City

FT LAUDERDALE, FL 33311-8508

7017 2680 0000 4978 7170

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- Return Receipt (electronic) \$ _____
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- Adult Signature Required \$ _____
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TD 43398 MAY 2021 WARNING

WILLIAMS, CALVIN L

301 SW 14 ST A

Street

FT LAUDERDALE, FL 33315

City, State, ZIP+4®

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

See Reverse for Instructions

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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
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Postage

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Total

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Sent

Street

City, State, ZIP+4™

TD 43398 MAY 2021 WARNING
CACH, LLC
4340 S MONACO, SECOND FLOOR
DENVER, CO 80237

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

See Reverse for Instructions

7017 2680 0000 4978 7194

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| <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 | \$ _____ |

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City, State,

TD 43398 MAY 2021 WARNING
CALVIN WILLIAMS
16501 NW 18 AVE
MIAMI, FL 33054

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

See Reverse for Instructions

7017 2680 0000 4978 7200

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<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
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TD 43398 MAY 2021 WARNING
CAROLYN WILLIAMS
535 NW 23RD AVE
FORT LAUDERDALE, FL 33311-7723

7017 2680 0000 4978 7217

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<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	\$ _____

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Street

City

TD 43398 MAY 2021 WARNING
CAROL S WILLIAMS
1146 NW 17TH AVE
FT LAUDERDALE, FL 33311-5858

7017 2680 0000 4978 7224

U.S. Postal Service
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<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
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<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

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City, State

TD 43398 MAY 2021 WARNING
CAROL WILLIAMS
5610 MAYO ST
HOLLYWOOD, FL 33023-2328

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

See Reverse for Instructions

7017 2680 0000 4978 7231

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TD 43398 MAY 2021 WARNING
CAROL WILLIAMS
2300 SW 83RD TER
MIRAMAR, FL 33025-5130

7017 2680 0000 4978 7248

U.S. Postal Service™
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Certified Mail Fee

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

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TD 43398 MAY 2021 WARNING
CAROL WILLIAMS
1506 NW 13TH CT
FT LAUDERDALE, FL 33311-5370

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

See Reverse for Instructions

7017 2680 0000 4978 7255

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

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- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
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TD 43398 MAY 2021 WARNING

CAROL ANGELA WILLIAMS

8990 S HOLLYBROOK BLVD APT 303

PEMBROKE PINES, FL 33025-1356

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City, State, ZIP

7017 2680 0000 4978 7262

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

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| <input type="checkbox"/> Return Receipt (hardcopy) | \$ _____ |
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| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ _____ |
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TD 43398 MAY 2021 WARNING
CITY OF FORT LAUDERDALE
ATTN: CITY ATTORNEY OFFICE
100 N ANDREWS AVE 7TH FLOOR
FORT LAUDERDALE, FL 33301

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

See Reverse for Instructions

7017 2680 0000 4978 7279

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Certified Mail Fee	
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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	\$ _____

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TD 43398 MAY 2021 WARNING
CITY OF FORT LAUDERDALE, CODE
ENFORCEMENT DIVISION
700 NORTHWEST 19TH AVENUE
FORT LAUDERDALE, FL 33311

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

See Reverse for Instructions

7017 2680 0000 4978 7286

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Certified Mail Fee	
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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	\$ _____

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Total P:	TD 43398 MAY 2021 WARNING
\$	CITY OF FORT LAUDERDALE, CODE ENFORCEMENT
Sent To	DIVISION, BUILDING DEPARTMENT
Street	700 NW 19TH AVENUE
City, &	FORT LAUDERDALE, FL 33311

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

See Reverse for Instructions

7017 2680 0000 4978 7293

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Certified Mail Fee	
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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	\$ _____
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TD 43398 MAY 2021 WARNING

CITY OF FORT LAUDERDALE, CODE ENFORCEMENT
DIVISION, DEPT OF SUSTAINABLE DEVELOPMENT
700 NW 19TH AVENUE
FORT LAUDERDALE, FL 33311

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

See Reverse for Instructions

7017 2680 0000 4978 7308

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CERTIFIED MAIL® RECEIPT
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Certified Mail Fee	
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<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	\$ _____

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TD 43398 MAY 2021 WARNING
CITY OF FORT LAUDERDALE, FINANCE
DEPARTMENT
100 NORTH ANDREWS AVENUE
FORT LAUDERDALE, FL 33301

7017 2680 0000 4978 7316

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Certified Mail Fee	
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<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
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City, State, ZIP+4®

TD 43398 MAY 2021 WARNING
CITY OF FORT LAUDERDALE, SPECIAL
MAGISTRATE
100 NORTH ANDREWS AVENUE
FORT LAUDERDALE, FL 33301

7017 2680 0000 4978 7323

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

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TD 43398 MAY 2021 WARNING

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Ser. DISCOVER BANK, ISSUER OF THE DISCOVER
CARD

Stre

210 SYLVAN AVENUE

City

ENGLEWOOD CLIFFS, NJ 07632

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

See Reverse for Instructions

7017 2680 0000 4978 7347

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- Return Receipt (hardcopy) \$ _____
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TD 43398 MAY 2021 WARNING
MIDLAND FUNDING LLC
PO BOX 290335
TAMPA, FL 33687

See reverse for Instructions

7017 2680 0000 4978 7354

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Certified Mail Fee	
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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	\$ _____
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Postmark
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Postage

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Total:

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Sent:

Street

City:

TD 43398 MAY 2021 WARNING
MEMORIAL REGIONAL HOSPITAL
3501 JOHNSON ST
HOLLYWOOD, FL 33021

7017 2680 0000 4978 7361

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Certified Mail Fee	
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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	\$ _____

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Total

\$ _____

Sent

Street

City, State, ZIP+4

TD 43398 MAY 2021 WARNING
JESSICA CHACON-CHANG, AUTHORIZED
REPRESENTATIVE OF MEMORIAL REGIONAL HOSPITAL
2900 CORPORATE WAY
MIRAMAR, FL 33025

7017 2680 0000 4978 7378

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Se	TD 43398 MAY 2021 WARNING
Str	PROGRESSIVE SELECT INSURANCE COMPANY, AS
Str	SUBROGEE FOR JAMES L. FENNELL
Str	P.O. BOX 89480
Str	CLEVELAND, OH 44101

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

See Reverse for Instructions

7017 2680 0000 4978 7385

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TD 43398 MAY 2021 WARNING
MARC J TANNEN ESQ
3616 NW 24TH AVE
BOCA RATON, FL 33431-5407

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

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7017 2680 0000 4978 7392

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Extra Services & Fees (check box, add fee as appropriate)	
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TD 43398 MAY 2021 WARNING

STEVEN J JACOBSON ESQ

LAW OFFICES OF STEVEN J JACOBSON, P.A.

5701 N PINE ISLAND RD, STE 320

FT LAUDERDALE, FL 33321

7017 2680 0000 4978 7408

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Certified Mail Fee	
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Extra Services & Fees (check box, add fee as appropriate)	
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TD 43398 MAY 2021 WARNING
STEPHEN H. BUTTER, ESQUIRE
TURNBERRY PLAZA PENTHOUSE, 2875
NORTHEAST 191 STREET
AVENTURA, FL 33180

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

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Certified Mail Fee	
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Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
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TD 43398 MAY 2021 WARNING
LAW OFFICES OF ANDREU, PALMA &
ANDREU, PL
701 SW 27TH AVE STE 900
MIAMI, FL 33135-3000

7017 2680 0000 4978 7422

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Certified Mail Fee	
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TD 43398 MAY 2021 WARNING
MARC J TANNEN ESQ
633 S ANDREWS AVE STE 500
FT LAUDERDALE, FL 33301-2858

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

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TD 43398 MAY 2021 WARNING
*FREEMAN, ANTHONY & ANNETTE
541 NW 23RD AVE
FT LAUDERDALE, FL 33311-7723

7017 2680 0000 4978 7446

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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
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TD 43398 MAY 2021 WARNING
*MONTANA, ANDERSON
529 NW 23RD AVE
FORT LAUDERDALE, FL 33311-7723

PS Form 3800, April 2015 PSN 7530-02-000-9001

Instructions

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Certified Mail Fee	
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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	\$ _____
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TD 43398 MAY 2021 WARNING
*CITY OF FORT LAUDERDALE
100 N ANDREWS AVE
FORT LAUDERDALE, FL 33301-1016

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

See Reverse for Instructions

7017 2680 0000 4978 7460

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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	\$ _____

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Total \$ _____

TD 43398 MAY 2021 WARNING
WILLIAMS, CAROLYN L EST % HELEN PEARL
WILLIAMS
2601 ACACIA COURT
FORT LAUDERDALE, FL 33301

7017 2680 0000 4978 7477

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, **SM** or on the front if space permits.

1. Article Addressed to:

**TD 43398 MAY 2021 WARNING
CAROLYN WILLIAMS
535 NW 23RD AVE
FORT LAUDERDALE, FL 33311-7723**



9590 9402 6458 0346 4780 78

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7217

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

X

B. Received by (Printed Name) C. Date of Delivery

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"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Insured Mail |
| <input type="checkbox"/> Insured Mail | <input type="checkbox"/> Registered Mail Restricted Delivery |

Domestic Return Receipt

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, **SM** or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 CALVIN WILLIAMS
 16501 NW 18 AVE
 MIAMI, FL 33054




9590 9402 6458 0346 4779 89

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7200

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
 X 

B. Received by (Printed Name) Yes
 C. Date of Delivery No
 C.W. 4/5/21

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"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Mail
 Mail Restricted Delivery
 (over \$500)

Domestic Return Receipt

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, **SM** or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 CALVIN WILLIAMS
 535 NW 23RD AVE
 FORT LAUDERDALE, FL 33311-7723



9590 9402 6458 0346 4780 16

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7163

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Addressee

B. Received by (Printed Name) C. Date of Delivery

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"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery | |
| <input type="checkbox"/> Registered Mail™ | |


Domestic Return Receipt

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, **SM** or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
***FREEMAN, ANTHONY & ANNETTE**
541 NW 23RD AVE
FT LAUDERDALE, FL 33311-7723



9590 9402 6458 0346 4781 53

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7446

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Mail 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, **SM** or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 CAROL WILLIAMS
 1506 NW 13TH CT
 FT LAUDERDALE, FL 33311-5370



9590 9402 6458 0346 4780 30

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7255

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *C19 AH* Agent
 Addressee

B. Received by (Printed Name) *1145* C. Date of Delivery *4/5/21*

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"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Domestic Return Receipt

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.

SM

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 CITY OF FORT LAUDERDALE, SPECIAL
 MAGISTRATE
 100 NORTH ANDREWS AVENUE
 FORT LAUDERDALE, FL 33301



9590 9402 6458 0346 4782 52

7017 2680 0000 4978 7323

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]*

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

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:
City of Fort Lauderdale
Mallroom/Receiving
100 N Andrews Ave
Ft Lauderdale FL 33301

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"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Mail
 Mail Restricted Delivery
 (over 5000)

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, **SM** or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 JESSICA CHACON-CHANG, AUTHORIZED
 REPRESENTATIVE OF MEMORIAL REGIONAL HOSPITAL
 2900 CORPORATE WAY
 MIRAMAR, FL 33025



9590 9402 6458 0346 4784 67

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7378

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *S9 C29 C19*

- Agent
- Addressee

B. Received by (Printed Name)

J. GONZALEZ

C. Date of Delivery

4/5/21

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
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Mail Restricted Delivery (over \$500)

Domestic Return Receipt

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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *D. Gendron* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
4/5/21

1 Article Addressed to:

TD 43398 MAY 2021 WARNING
 *CITY OF FORT LAUDERDALE
 100 N ANDREWS AVE
 FORT LAUDERDALE, FL 33301-1016

9590 9402 6182 0220 7062 97

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

City of Fort Lauderdale
 Mailroom/Receiving
 100 N Andrews Ave
 Ft Lauderdale FL 33301

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7460

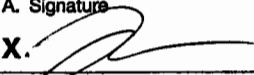
3. Service Type

<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"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Insured Mail
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Mail 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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X.  Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 WIA 4-5

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 MARC J TANNEN ESQ
 3616 NW 24TH AVE
 BOCA RATON, FL 33431-5407

SM

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



9590 9402 6458 0346 4784 43

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"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

2. Article Identification Number (Transfer from service label)
 7017 2680 0000 4978 7392

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, **SM** or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 CITY OF FORT LAUDERDALE
 ATTN: CITY ATTORNEY OFFICE
 100 N ANDREWS AVE 7TH FLOOR
 FORT LAUDERDALE, FL 33301



9590 9402 6458 0346 4779 58

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7279

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Addressee Agent

B. Received by (Printed Name) C. Date of Delivery

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

**City of Fort Lauderdale
 Mailroom/Receiving
 100 N Andrews Ave
 Ft Lauderdale FL 33301**

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"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Domestic Return Receipt

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, **SM** or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 CITY OF FORT LAUDERDALE, FINANCE
 DEPARTMENT
 100 NORTH ANDREWS AVENUE
 FORT LAUDERDALE, FL 33301



9590 9402 6458 0346 4779 10

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7316

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Addressee
 Agent

B. Received by (Printed Name) C. Date of Delivery

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

City of Fort Lauderdale
Mailroom/Receiving
100 N Andrews Ave
Ft Lauderdale FL 33301

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"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> 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, SM or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 CAROL S WILLIAMS
 1146 NW 17TH AVE
 FT LAUDERDALE, FL 33311-5858



9590 9402 6458 0346 4780 61

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7224

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Carol S Williams* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

5-6

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"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery 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, **SM** or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
CAROL WILLIAMS
5610 MAYO ST
HOLLYWOOD, FL 33023-2328



9590 9402 6458 0346 4780 54

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7231

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

X

B. Received by (Printed Name) C. Date of Delivery

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"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | |
| <input type="checkbox"/> Insured Mail | |

Mail Restricted Delivery (M)

Domestic Return Receipt

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, **SM** or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 CAROL ANGELA WILLIAMS
 8990 S HOLLYBROOK BLVD APT 303
 PENSACOLA, FL 33025-1356

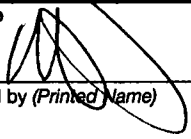


9590 9402 6458 0346 4780 23

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7262

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 9/16/2021

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"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery 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. **SM**
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**TD 43398 MAY 2021 WARNING
WILLIAMS, CAROLYN L EST % HELEN PEARL
WILLIAMS
3310 ALHAMBRA CIR
HAMPTON, GA 30228-3633**



9590 9402 6182 0220 7062 73

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7484

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X COV 19

Agent

Addressee

B. Received by (Printed Name)

COV 19

C. Date of Delivery

4 5 21

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
- Insured Mail
- Registered Mail Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- 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.

SM

1. Article Addressed to:

TD 43398 MAY 2021 ~~WARNING~~
 MIDLAND FUNDING LLC
 PO BOX 290335
 TAMPA, FL 33687



9590 9402 6458 0346 4784 81

Article Number (Transfer from service label)

7017 2680 0000 4978 7354

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 T. Combs Addressee

B. Received by (Printed Name) Date of Delivery
T. Combs

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
 - Insured Mail
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery
 - Mail 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, **SM** or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 STEVEN J JACOBSON ESQ
 LAW OFFICES OF STEVEN J JACOBSON, P.A.
 5701 N PINE ISLAND RD, STE 320
 FT LAUDERDALE, FL 33321



9590 9402 6458 0346 4781 91

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7408

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

S. JACOBSON

C. Date of Delivery

4/5/21

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
 - Signature Confirmation™
 - 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.

SM

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 PROGRESSIVE SELECT INSURANCE COMPANY, AS
 SUBROGEE FOR JAMES L. FENNELL
 P.O. BOX 89480
 CLEVELAND, OH 44101



9590 9402 6458 0346 4784 50

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7385

PS Form 3811, July 2020 PSN 32-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) 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
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

Domestic Return Receipt

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, SM or on the front if space permits.

1. Article Addressed to:

TD 43398 MAY 2021 WARNING
 BROWARD COUNTY, CLERK OF THE CIRCUIT
 COURT
 201 SE 6TH ST RM 18150
 FT LAUDERDALE, FL 33301-3303



9590 9402 6458 0346 4779 03

2. Article Number (Transfer from service label)

7017 2680 0000 4978 7330

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
P. Rodriguez Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 P. Rodriguez APR 19 2021

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

- Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

(over \$500) **04/22/21** Domestic Return Receipt