

339 SIXTH AVENUE, SUITE 1400 PITTSBURGH, PA 15222

Phone: (412) 391-5555 Fax: (412) 391-7608

E-mail: <u>TitleExpress@grantstreet.com</u>

www.GrantStreet.com

PROPERTY INFORMATION REPORT

ORDER DATE: 09/09/2019

REPORT EFFECTIVE DATE: 20 YEARS UP TO 09/08/2019

CERTIFICATE # 2016-4260 ACCOUNT # 494101161530 ALTERNATE KEY # 177022 TAX DEED APPLICATION # 43745

TAX DEED ATTLICATION # 45/43

COUNTY, STATE: BROWARD, FL

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

LEGAL DESCRIPTION:

LOT 3, BLOCK 9, KIMBERLY FOREST SECTION TWO, ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 74, AT PAGE 24, OF THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA.

PROPERTY ADDRESS: 520 SW 62 WAY, MARGATE FL 33068

OWNER OF RECORD ON CURRENT TAX ROLL:

KAY TAYLOR H/E
MURIEL E WILLIAMS
520 SW 62 WAY
MARGATE, FL 33068 (Matches Property Appraiser records.)

APPARENT TITLE HOLDER & ADDRESS OF RECORD:

MURIEL E. WILLIAMS AND KAY TAYLOR OR: 44301, Page: 969

502 SW 62ND WAY MARGATE, FL 33068

(Per Deed. This Deed appears to be invalid due to no witness signatures. No re-recorded or corrective deeds found in the Official Records.)

MURIEL ELIZABETH WILLIAMS AND OR: 44301, Page: 968

KAY F. TAYLOR 502 SW 62ND WAY MARGATE, FL 33068

(Per Deed. This Deed appears to be invalid due to no witness signatures. No re-recorded or corrective deeds found in the Official Records.)

ALDOUPHUS WILLIAMS AND MURIEL WILLIAMS OR: 35594, Page: 397 520 SW 62 WAY

MARGATE, FL 33068 (Per Deed. Deed appears to be invalid due to missing notary seal. Due to the invalidity of Deeds in 44301-968 and 44301-969, Aldouphus Williams is being included as an additional owner. No re-recorded or corrective deed found in the Official Records. Also no additional deeds or probate documents found in the Official Records conveying or releasing his interest in this property.)

KAY FRANCES FOX OR: 29784, Page: 663

520 S.W. 62ND WAY MARGATE, FL 33068

(Per Deed. Due to the invalidity of the Deed in 35594-397, Kay Frances Fox is also being included as an additional owner. No additional deeds or probate documents found in the Official Records conveying or releasing her interest in this property.)

MORTGAGE HOLDER OF RECORD:

None found.

LIENHOLDERS AND OTHER INTERESTED PARTIES OF RECORD:

CLUSIA

SB MUNI CUST FOR

PO BOX 54049

NEW ORLEANS, LA 70154-4049 (Tax Deed Applicant)

BROWARD COUNTY OR: 50465, Page: 628

CLERK OF THE CIRCUIT COURT

(Per Orders. No address or image included per county's request)

BROWARD COUNTY Instrument: 112852716

BROWARD PERMITTING/LICENSING 1 N UNIVERSITY DRIVE BOX 300 PLANTATION, FL 33324 (Per Lien)

BROWARD COUNTY
PARKING DIVISION
201 SE 6TH STREET RM 220
FT LAUDERDALE, FL 33301 (Per Lien in 112852716.)

PROPERTY INFORMATION REPORT - CONTINUED

PARCEL IDENTIFICATION NUMBER: 4941 01 16 1530

CURRENT ASSESSED VALUE: \$238,900 HOMESTEAD EXEMPTION: Yes 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.

Wendy Carter

Title Examiner

9/9/2019 520 SW 62 WAY



| Site Address | 520 SW 62 WAY, MARGATE FL 33068 | ID# | 4941 01 16 1530 |
|---------------------------|---|---------|-----------------|
| | TAYLOR,KAY H/E | Millage | 1212 |
| | WILLIAMS,MURIEL E | Use | 01 |
| Mailing Address | 520 SW 62 WAY MARGATE FL 33068 |] | |
| Abbr Legal Description | KIMBERLY FOREST SEC 2 74-24 B LOT 3 BLK 9 | | |

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).

| | red | uction | for c | osts of s | ale and | other adjustmen | ts req | uired by <mark>Sec</mark> | . 193.0 | 11(8). | |
|------------|---------|------------|-------|---------------------------|---------|---------------------|------------------------|---------------------------|-------------------------|--------------|----------|
| | | | | | Proper | rty Assessment \ | /alues | | | | |
| Year | Lan | d | | Building / Improvement | | Just / Mar Value | Just / Market Value | | Assessed / SOH Value | | x |
| 2018 | \$35,36 | 60 | | \$297,72 | :0 | \$333,080 | | \$208,1 | 60 | | |
| 2017 | \$26,52 | 20 | | \$265,89 | 0 | \$292,410 | ı | \$194,3 | \$194,330 | | 1.16 |
| 2016 | \$26,52 | 20 | | \$241,84 | .0 | \$268,360 | | \$181,6 | 50 | \$3,28 | 1.68 |
| | | | 2018 | Exempti | ons an | d Taxable Values | by Ta | xing Authori | ty | · | |
| | | | | С | ounty | School E | Board | Munic | ipal | Inde | pendent |
| Just Valu | ie | | | \$33 | 33,080 | \$33 | 3,080 | \$333 | ,080 | \$ | 333,080 |
| Portabilit | y | | | | 0 | | 0 | Ì | 0 | | 0 |
| Assesse | d/SOH 0 | 8 | | \$20 | 08,160 | \$23 | 8,900 | \$208 | ,160 | \$ | 208,160 |
| Homeste | ad 50% | | | \$2 | 25,000 | \$2 | 5,000 | \$25 | ,000 | | \$25,000 |
| Add. Hon | nestead | | | \$2 | 22,360 | | 0 | \$22 | ,360 | \$22,360 | |
| Wid/Vet/D | Dis | | | | 0 | | 0 | | 0 | 0 | |
| Senior | | | | | 0 | | 0 | | 0 | 0 | |
| Exempt 1 | Гуре | | | | 0 | | 0 | | 0 | | 0 |
| Taxable | | | | \$16 | 60,800 | \$21 | 3,900 | \$160 | ,800 | \$ | 160,800 |
| | | 5 | Sales | History | | | | Land | Calcu | lations | |
| Date | Т | Гуре | | Price | Bool | k/Page or CIN | | Price | F | actor | Type |
| 1/3/200 | 7 QC | CD-T | \$ | 5100 | 4 | 4301 / 969 | | \$4.00 | 8 | ,840 | SF |
| 1/3/200 | 7 QC | CD-T | \$ | 3100 | 4 | 4301 / 968 | | | | | |
| 6/27/200 | 03 V | V D | \$11 | 10,000 | 3 | 5594 / 397 | | | | | |
| 7/27/199 | 99 S' | WD | \$9 | 5,000 | 2 | 9784 / 663 | | | | | |
| 3/29/199 | 99 C | ET | \$ | 100 | 2 | 29376 / 35 | Ac | lj. Bldg. S.F. | (Card, | Sketch) | 2456 |
| | • | | | | | | | Un | its | | 1 |
| | | | | | | | | Eff./Act. Ye | ear Buil | lt: 1974/197 | 3 |
| | | | | | | aial Aasaaanan | | | | | |

| | Special Assessments | | | | | | | |
|------|---------------------|-------|-------|------|------|-------|-------|------|
| Fire | Garb | Light | Drain | Impr | Safe | Storm | Clean | Misc |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Please Note: The City of Margate levies a non-ad valorem fire assessment. The fire assessment, if any, is not included in the tax amounts shown above.

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

CERTIFICATE OF MAILING NOTICES

Tax Deed #43745

STATE OF FLORIDA **COUNTY OF BROWARD**

THIS IS TO CERTIFY that I, County Administrator in and for Broward County, Florida, did on the 2nd day of January 2020, 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:

| ALDOUPHUS WILLIAMS AND MURIEL WILLIAMS 520 SW 62 WAY MARGATE, FL 33068 | KAY TAYLOR 520 SW 62ND WAY MARGATE, FL 33068 | KAY FRANCES FOX 520 S.W. 62ND WAY MARGATE, FL 33068 | MURIEL E. WILLIAMS 520 SW 62ND WAY MARGATE, FL 33068 |
|--|---|---|---|
| BROWARD COUNTY CLERK OF THE CIRCUIT COURT 201 SE 6TH STREET FORT LAUDERDALE, FL 33301 | BROWARD COUNTY PARKING DIVISION 201 SE 6TH STREET RM 220 FT LAUDERDALE, FL 33301 | BROWARD COUNTY PERMITTING/LICENSING 1 N UNIVERSITY DRIVE BOX 300 PLANTATION, FL 33324 | ALDOUPHUS L. WILLIAMS 441 MARTIN ROAD MARGATE, FL 33068 |
| CITY OF MARGATE CITY MANAGER'S OFFICE 5790 MARGATE BLVD MARGATE, FL 33063 | KAY FRANCES TAYLOR 520 SW 62ND WAY MARGATE, FL 33068 | KAY FRANCES TAYLOR 2700 CORONET WAY CHARLOTTE, NC 28208-3457 | MURIEL ELIZABETH WILLIAMS 520 SW 62ND WAY MARGATE, FL 33068 |
| MURIEL WILLIAMS 441 MARTIN RD MARGATE, FL 33068 | *BARRINGTON WEBB 530 SW 62 WAY MARGATE, FL 33068-1729 | *MARC GARRY TOUSSAINT 521 SW 62 TERRACE MARGATE, FL 33068-1740 | *NOEL JOSE GARCIA 510 SW 62WAY MARGATE, FL 33068-1719 |

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 2nd day of January 2020 in compliance with section 197.522 Florida Statutes, 1995, as amended by Chapter 95-147 Senate Bill No. 596, Laws of Florida 1995.

SEAL

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

| By | |
|---------------------------|--|
| Deputy Juliette M. Aikman | |

Broward County, Florida

INSTR # 116153412 Recorded 11/04/19 at 12:19 PM **Broward County Commission** 1 Page(s)

RECORDS, TAXES & TREASURY DIVISION/TAX DEED SECTION

NOTICE OF APPLICATION FOR TAX DEED NUMBER 43745

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:

494101-16-1530

Certificate Number:

4260

Date of Issuance:

05/25/2017

Certificate Holder:

CLUSIA SB MUNI CUST FOR

Description of Property: KIMBERLY FOREST SEC 2 74-24 B

LOT 3 BLK 9

Name in which assessed: TAYLOR, KAY H/E WILLIAMS, MURIEL E

Legal Titleholders:

TAYLOR, KAY H/E WILLIAMS, MURIEL E 520 SW 62 WAY MARGATE, FL 33068

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 February , 2020 . 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.deedauction.net *Pre-registration is required to bid.

Dated this 1st day of November 2019

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

01/16/2020, 01/23/2020, 01/30/2020 & 02/06/2020

Minimum Bid: 130678.67

401-314

Broward County, Florida

RECORDS, TAXES & TREASURY DIVISION/TAX DEED SECTION

NOTICE OF APPLICATION FOR TAX DEED NUMBER 43745

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: 494101-16-1530

Certificate Number: 4260
Date of Issuance: 05/25/2017

Certificate Holder: CLUSIA SB MUNI CUST FOR Description of Property: KIMBERLY FOREST SEC 2 74-24 B

LOT 3 BLK 9

Name in which assessed: TAYLOR, KAY H/E WILLIAMS, MURIEL E

Legal Titleholders: TAYLOR,KAY H/E

WILLIAMS, MURIEL E 520 SW 62 WAY MARGATE, FL 33068

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 February ,2020 . 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.deedauction.net *Pre-registration is required to bid.

Dated this 16th day of January 2020.

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: 01/16/2020, 01/23/2020, 01/30/2020 & 02/06/2020

Minimum Bid: 131050.67

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

43745 NOTICE OF APPLICATION FOR TAX DEED CERTIFICATE NUMBER: 4260

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

01/16/2020 01/23/2020 01/30/2020 02/06/2020

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
advettisement for publication in the said newspaper.

Sworn to and subscribed before me this

6 day of FEBRUARY, A.Q. 2020

(SEAL) C
SCHERRIE A. THOMAS personally known to me

NADINE MODESTIL
Notary Public – State of Florida
Commission # FF 968154
My Comm. Expires Mar 6, 2020

Broward County, Florida RECORDS, TAXES & TREASURY DIVISION/TAX DEED SECTION NOTICE OF APPLICATION FOR TAX DEED NUMBER 43745

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: 494101-16-1530 Certificate Number: 4260' Date of Issuance: 05/25/2017 Certificate Holder:

CLUSIA SB MUNI CUST FOR
Description of Property:

KIMBERLY FOREST SEC 2 74-24 B LOT 3 BLK 9

Name in which assessed: TAYLOR, KAY H/E WILLIAMS, MURIEL E

Legal Titleholders: TAYLOR, KAY H/E WILLIAMS, MURIEL E 520 SW 62 WAY MARGATE, FL 33068

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 February, 2020. Prebidding shall open at 9:00 AM EDT, sale shall commence at 10:00 AM EDT and shall begin closing at 11:01 AM

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

Dated this 16th day of January, 2020.
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 suc-

cessful bidder is responsible to pay any outstanding taxes. Minimum Bid: 131084.15 401-314 1/16-23-30 2/6 20-01/0000449148B. .

CFN # 103113433, OR BK 35594 Page 397, Page 1 of 1, Recorded 07/15/2003 at 08:38 AM, Broward County Commission, Doc. D \$770.00 Deputy Clerk 1913

06/27/2003 FRI 16:44 FAX 954 577 9506 ALLEGIANCE TITLE INC

2003/018

THIS INSTRUMENT PREPARED BY AND RETURN TO:

Space Above This Line For Recording Data

THIS WARRANTY DEED, made the day of July 2003 by Kay Frances Fox, a single woman whose post office address is 500 for July 2004 herein called the grantor, to Aldouphus Williams and Muriel Williams, husband and wife, whose post office address is 520 SW (Wherever used herein the terms "grantor" and "grantor" include all the parties to this instrument and the heirs, legal recresculatives and assigns of individuals, and the successors and assigns of corporations)

WITNESSETH: That the grantor, for and in consideration of the sum of TEN AND 00/100'S (\$10.00) Dollare and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee all that certain land situate in BROWARD County, State of Florida, viz.:

LOT 3, IN BLOCK 9, IN KIMBERLY FOREST SECTION TWO, ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 74, AT PAGE 24, OF THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA.

TOGETHER, with all the tenements, hereditaments and appurtenances thereto belonging, or in anywise appermining.

TO HAVE AND TO HOLD, the same in fee simple forever.

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

IN WITNESS WHEREOF, the said granter has signed and scaled these presents the day and year first above written.

Signed scaled and delivered in the presence of:

Witness #1 Signature

Witness #1 Printed Name

Witness #2 Signature
Noncy Don On
Witness #2 Printed Name

STATE OF FLORIDA NOTT COLOTION A

The foregoing instrument was acknowledged before me this 27 Frances Fox who is personally known to me or has produced

27 day of June, 2003

by Kay

SEAL

Notary Public

DENISE F. MOSTER

My Commission Expires: 10-8-2007

(t)

Quitclaim Deed

| This Quitclaim Deed is made on January 3rd | , 20 07 , between |
|--|--|
| Murial Williams | , Grantor, |
| address: 441 Martin Road, Margate, FL 33068 | |
| | |
| and Muriel Elizabeth Williams And Kay F. Tayl | or Grantee, Teamer 2. The |
| address: 520 SW 62nd Way, Margate, FL 3306 | |
| , , , , , , , , , , , , , , , , , , , | Stin Ple |
| • | |
| For valuable consideration, the Grantor hereby quitele | nims and transfers the following described |
| real estate to the Grantee to have and hold forever, | |
| 520 SW 62nd Way | ; |
| City of Margate, State of | Florida : |
| Legal Description: Kimberly Enge | |
| | 3, Sec 274-24 R 1- |
| | Florida: LST Sec 274-24 B Lot 3 BIK 9 |
| Dated: January 3rd , 20 07 | |
| $\overline{\Omega}$ | |
| M/ ATI | A 4 |
| Thurs with | Murial Williams |
| Signature of Grantor | Printed Name of Grantor |
| | |
| State of Florica | |
| County of brow as a | |
| | |
| On $\frac{50}{9}$, $\frac{7}{9}$, $\frac{20}{9}$, | Murial Williams |
| personally came before me and, being duly sworn, scribed in the above document and that he or she sign | did state that he or she is the person de- |
| Solver in the above document and that he of she sign | ned the above document in my presence. |
| Margana (and) | |
| Signature of Notary Public | |
| ⊘ | • |
| Notary Public, In and for the County of Olive | <i>Yd</i> |
| State of Florida | |
| My commission expires: 50×1000 | Notary Seal |
| | Trotally Seal |
| | AND INCOME. |
| | A Committee Septem Ad 10, 2010 |



Quitclaim Deed

| This Quitclaim Deed is made on January, 3rd , 20 07 , between Aldouphus L. Williams , Grantor, | |
|--|--------------------------------------|
| address: 441 Martin Road, Margate, Florida 33068 | |
| and Muriel E. Williams And Kay Taylor Towner, BetaTing, Grantee, address: 520 SW 62nd Way, Margate, Florida 33068 Legal Description Kimberty Forest Sec. 2.74 - 24 For valuable consideration, the Grantor hereby quitclaims and transfers the following described real estate to the Grantee to have and hold forever, located at | B 40T3 BIK9 |
| 520 SW 62nd Way | |
| City of Margate, State of Florida: | |
| Dated: January 3rd, , 20 07 Aldouphus L. Williams | |
| Signature of Grantor Printed Name of Grantor | |
| State of Flor da County of Broward On July 6th , 2007, Aldouphus L. Williams personally came before me and, being duly sworn, did state that he or she is the person described in the above document and that he or she signed the above document in my presence. Signature of Notary Public Notary Public, In and for the County of Broward Cristina Explored Commission # DD Bondad By National Notational National Nati | of Florida Mar 29, 2009 412340 |
| My commission expires: 129, 2009 Notary Seal | |

INSTR # 112852716 Page 1 of 2, Recorded 03/06/2015 at 02:24 PM Broward County Commission, Deputy Clerk 2150

NOTICE OF LIEN

Citation Number: EB-00027314

KNOW ALL MEN by these presents that, pursuant to Chapter 162, Florida Statutes, a certified copy of an Adminitrative Hearing Disposition (attached exhibit "A") has been recorded in the public records of Broward County, Florida, and, therefore, constitutes a lien against the real and personal property of the following person(s) or entity:

ALDOUPHUS WILLIAMS

14-0265

said real property being described as:

441 MARTIN ROAD MARGATE, FL 33068-0000

Such lien shall be effective for twenty (20) years from the date of recording and shall be eligible for foreclosure if unpaid within three (3) months from said recordation date if the property does not carry homestead exemption.

BROWARD COUNTY

KUZ POOL

Hearing Officer Doody, Esq.

Sworn to and subscribed before me this

27th day of Feb., 2015

Notary Public

Commission:

 \checkmark

М

RAINELLE MORAN
MY COMMISSION #FF027869
EXPIRES: JUL 19, 2017
Bonded through 1st State insurance

Return to: BROWARD PERMITTING/LICENSING 1 N UNIVERSITY DRIVE BOX 300 PLANTATION, FLORIDA 33324-0000

Z

HOWARD C. FORMAN
Clerk of Circuit Court and County Court
17TH Judicial Circuit
In and for Broward County

Parking Division 201 SE 6th Street Rm 220 Ft Lauderdale, FL 33301 Pay by Phone (954) 712-7899 Information (954) 831-5804

Hearing Date: 12/05/2014
Hearing Officer: CADDY, GAVIN

ALDOUPHUS WILLIAMS
441 MARTIN ROAD
MARGATE, FL 33068-0000

14-0265

Citation #: EB-00027314
Offense(s): TREE/TRIM ADVERTISE W/O LICENS

An Administrative Hearing was held this date on the above referenced citation. Based on statements made by the defendant and/or witnesses and the evidence submitted, the citation is HEREBY HELD to BE:

| (|) Dismissed | (X) Val | .id | () Ir | nvalid | | |
|------------------------|--|---|------------------------|------------|---------------------|--------------------|-----------------|
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| | Fir | ninistrative ne Amount tal Amount D | \$ | 500 500 | | - | |
| PAYMENT DO | UE DATE: 12/22 Day of each mo 1st, 2014 | 2/2014. Sch onth until f | eduled pa ine is pa | ayments o | of \$ ull, payme | will ents to | be due begin |
| | | | | • | | <i>:</i> | |
| recommend with reim | er, pursuant to s the applicabl bursement from ount of \$ | le Central E Central Exa | Examining | Board pi | rovide Co | nplainar | ot. |
| thè Respo | er, pursuant to ndent to cease ng without holo | and desist | from enga | aging in | the busin | rsigned ness of | ORDERS |
| WITNESSES | ¥ | | · | | | | |
| EVIDENCE: | | | 1/ | | | | |
| , | | 1 | 41 | 1 | | | |
| | | ✓ Admi | nistrati | e Hearin | ig Office | #- | |



INSTR # 99505116 OR BK 29784 PG 0663

RECORDED 08/25/99 07:52 AM COMMISSION BROWARD COUNTY DOC STHP-D 665.00 DEPUTY CLERK 1047

PREPARED BY & RETURN TO: LEILA ANDERSON, P.A.
INTRACOASTAL BUILDING, SUITE 105
3000 N.E. 30TH PLACE
FORT LAUDERDALE, FLORIDA 33306

A Notary Public Uddition 1987 64

My commission and 1987 2131 64

Laser General by Q Distray Syste

| July ,1999 A.D. | |
|---|---|
| | Between |
| N, A FEDERAL SAVINGS AND I | |
| Part of an a manager | grantor |
| State of CALIFORNIA | , grantor, a |
| | |
| TE, FL 33068 | |
| State of Florida | , grantee. |
| eum of | |
| RS (\$10) | DOLLAR |
| | |
| | to wit: |
| | the Plat |
| .da, | |
| | |
| | |
| thereto belonging or in anywise appertaining. | |
| | |
| antor is lawfully seized of said land in fee and; that grantor hereby fully warrants the title mg by, through or under grantor. | |
| - · · · - | |
| / / | /7 |
| WORLD SAVINGS AND LOAN | ASSOCIATION, |
| | |
| 7777 × 1/2 | \mathcal{Y} |
| 34: 14 (E) 1 (lear | (Sea |
| P.O. Address: 1901 HARRISON STREET, OA | DENT |
| A.O. Audies. 1701 HARASON STREET, UA | ALMID, CALIFORNIA |
| \sim 0 | |
| Mari that the man | 00 |
| Whiteh W | USEA (Sea |
| BY: MARÍ-BETH MAYER | Uffil (Seal |
| BY: MARÍ-BETH MAYER ASSISTANT SECRETARY P.O. Address 1901 HARRISON STREET, OA | |
| BY: MARÍ-BETH MAYER ASSISTANT SECRETARY P.O. Address: 1901 HARRISON STREET, OA | KLAND, CALIFORNIA |
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| P.O. Address: 1901 HARRISON STREET, OA July RI-BETH MAYER, ASSISTANT S J. A FEDERAL SAVINGS AND L | KLAND, CALIFORNIA (Corporate Seal , 1999 b) |
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Notary Public My Commission Expires;

ems, Inc., 1998 (941) 763-5555 Form FLSWD-1

WARNING

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

ALDOUPHUS WILLIAMS AND MURIEL WILLIAMS 520 SW 62 WAY MARGATE, FL 33068

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 520 SW 62 WAY, MARGATE, FL 33068 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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PAYMENT MUST BE MADE IN CASH, MONEY ORDER OR CASHIER'S CHECK; <u>PERSONAL OR</u> BUSINESS CHECKS ARE NOT ACCEPTED.

AMOUNTS SHOWN BELOW ARE <u>ESTIMATED</u> AMOUNTS DUE WHICH MAY BE SUBJECT TO ADDITIONAL FEES. PLEASE CALL (954) 357-5374 FOR THE CORRECT AMOUNT DUE <u>PRIOR TO</u> 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 January 31, 2 | 2020 | \$14,873.94 |
|---|------|-------------------|
| | Or | |
| * Fatimated Amount due if weld by Fabruary 40 | 2020 | 645 OCE 54 |

* Estimated Amount due if paid by February 18, 2020\$15,065.51

THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON February 19, 2020 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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BROWARD COUNTY CLERK OF THE CIRCUIT COURT 201 SE 6TH STREET FORT LAUDERDALE, FL 33301

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BROWARD COUNTY PARKING DIVISION 201 SE 6TH STREET RM 220 FT LAUDERDALE, FL 33301

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BROWARD COUNTY PERMITTING/LICENSING
1 N UNIVERSITY DRIVE BOX 300
PLANTATION, FL 33324

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CITY OF MARGATE CITY MANAGER'S OFFICE 5790 MARGATE BLVD MARGATE. FL 33063

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MURIEL ELIZABETH WILLIAMS 520 SW 62ND WAY MARGATE, FL 33068

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* Estimated Amount due if paid by February 18, 2020\$15,065.51

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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

WARNING

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

BARRINGTON WEBB 530 SW 62 WAY MARGATE, FL 33068-1729

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 520 SW 62 WAY, MARGATE, FL 33068 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 January 31, 2 | 020\$14,873.94 |
|---|------------------|
| | Or |
| * Estimated Amount due if paid by February 18.3 | 2020 \$15,065,51 |

Estimated Amount due if paid by February 18, 2020\$15,065.51

THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON February 19, 2020 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

WARNING

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

MARC GARRY TOUSSAINT 521 SW 62 TERRACE MARGATE, FL 33068-1740

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 520 SW 62 WAY, MARGATE, FL 33068 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. <u>IF YOU DO NOT OWN OR HAVE LEGAL INTEREST IN</u> THIS PROPERTY, PLEASE DISREGARD THIS NOTICE.

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

AMOUNTS SHOWN BELOW ARE <u>ESTIMATED</u> AMOUNTS DUE WHICH MAY BE SUBJECT TO ADDITIONAL FEES. PLEASE CALL (954) 357-5374 FOR THE CORRECT AMOUNT DUE <u>PRIOR TO</u> 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 January 31, 2 | 2020 | \$14,873.94 |
|---|------|-------------|
| | Or | |
| * Fatimated Amount due if maid by Fabruary 40 | 2020 | CAE OCE EA |

* Estimated Amount due if paid by February 18, 2020\$15,065.51

THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON February 19, 2020 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

WARNING

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

NOEL JOSE GARCIA 510 SW 62WAY MARGATE, FL 33068-1719

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 520 SW 62 WAY, MARGATE, FL 33068 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. <u>IF YOU DO NOT OWN OR HAVE LEGAL INTEREST IN</u> THIS PROPERTY, PLEASE DISREGARD THIS NOTICE.

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

AMOUNTS SHOWN BELOW ARE <u>ESTIMATED</u> AMOUNTS DUE WHICH MAY BE SUBJECT TO ADDITIONAL FEES. PLEASE CALL (954) 357-5374 FOR THE CORRECT AMOUNT DUE <u>PRIOR TO</u> 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 January 31, 2 | 2020 | \$14,873.94 |
|---|------|-------------|
| | Or | |
| * Estimated Amount due if noid by Eshruary 10 | 2020 | \$4E 06E E4 |

* Estimated Amount due if paid by February 18, 2020\$15,065.51

THERE ARE UNPAID TAXES ON THIS PROPERTY AND THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON February 19, 2020 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

| 田田 | U.S. Postal Service [™] CERTIFIED MAIL® RECEIPT Domestic Mail Only |
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| 86 | For delivery information, visit our website at www.usps.com . |
| _0 | OFFICIAL USE |
| 623 | Certified Mail Fee |
| -0 | Extra Services & Fees (check box, add fee as appropriate) |
| | Return Receipt (hardcopy) \$ |
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| 7 | \$ |
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| _ | \$ ALDOUPHUS WILLIAMS |
| 12 | Sent To AND MURIEL WILLIAMS |
| 7019 | Street and Apt. N 520 SW 62 WAY |
| ~ | MARGATE, FL 33068 |
| | City, State, ZIP+4 |
| • | PS Form 3800. April 2015 PSN 7530-02-000-9047 See Reverse for Instructions |

| 6 8647 | U.S. Postal Service [™] CERTIFIED MAIL [®] RECEIPT Domestic Mail Only For delivery information, visit our website at www.usps.com . | |
|-----------|---|--|
| 0000 623 | Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) Return Receipt (hardcopy) | |
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| 298 | U.S. Postal Service [™] CERTIFIED MAIL [®] RECEIPT Domestic Mail Only | | | |
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| 6 | For delivery information, visit our website at www.usps.com®. | | | |
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| P 5 5 | \$ | | | |
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| 020 | Adult Signature Restricted Delivery \$ Postage | | | |
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| 7019 | \$ KAY FRANCES FOX 520 S.W. 62ND WAY | | | |
| | Street and Apt. MARGATE, FL 33068 | | | |
| | City, State, ZIP | | | |
| | PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions | | | |

| 4304 | U.S. Postal Service [™] CERTIFIED MAIL® RECEIPT Domestic Mail Only For delivery information, visit our website at www.usps.com [™] . | | |
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| 7019 | Sent To Sent To 520 SW 62ND WAY Street and Apt. No. | | |
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| 171 | U.S. Postal Service [™] CERTIFIED MAIL [®] RECE Domestic Mail Only | IPT |
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| 1 | \$ BROWARD COU | NTY CLERK |
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| 932 8 | U.S. Postal Service [™] CERTIFIED MAIL [®] RECEIPT Domestic Mail Only For delivery information, visit our website at www.usps.com [®] . |
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| 7019 | Sent To 201 SE 6TH STREET RM 220 Street and Apt. 1 |
| | City, State, ZIP++ |

| 335 | U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only |
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| | For delivery information, visit our website at www.usps.com [®] . |
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| 27 | Certified Mail Fee |
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| | 1 TONOARI ZUZU WARNING |
| | \$ BROWARD COUNTY PERMITTING/LICENSING |
| 1 | I N UNIVERSITY DRIVE BOX 300 |
| | Sent To PLANTATION, FL 33324 |
| 7019 | Street and Apt. |
| | City, State, ZiP++ |
| 1 | PS Form 3800 April 2015 PSN 7530-02-000-9047 See Reverse for Instructions |

| 9345 | U.S. Postal Service [™] CERTIFIED MAIL [®] RECEIPT Domestic Mail Only For delivery information, visit our website at www.usps.com [®] . |
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| 7019 | \$ Sent To MARGATE, FL 33068 Street and Apt. |
| | City, State, ZIP. |

| 359 | U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only |
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| 5 | For delivery information, visit our website at www.usps.com®. |
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| Ę, | Certified Mail Fee \$ |
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| 7 | \$ TD 43745 FEBRUARY 2020 WARNING |
| | CITY OF MARGATE |
| <u></u> | Sent To CITY MANAGER'S OFFICE |
| 7019 | 5790 MARGATE BLVD |
| | MARGATE, FL 33063 |
| | PS Form 3800. April 2015 PSN 7530-02-000-9047 See Reverse for Instructions |

| 1968 | U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only For delivery information, visit our website at www.usps.com®. | |
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| 380 | U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only |
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| - | MURIEL ELIZABETH WILLIAMS |
| 7019 | Sent To 520 SW 62ND WAY |
| 7. | Street and Apt. N MARGATE, FL 33068 |
| | City, State, ZIP+ |
| , | DS Form 3900 April 2015 DSN 7520 02 000 0047 See Reverse for Instructions |

| 397 | U.S. Postal Service [™] CERTIFIED MAIL® RECEIPT Domestic Mail Only |
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| 2 | Street and Apt. MARGATE, FL 33068 |
| | City, State, ZIP4 |
| | PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions |

| 9403 | U.S. Postal Service [™] CERTIFIED MAIL [®] RECEIPT Domestic Mail Only |
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| 16 | For delivery information, visit our website at www.usps.com®. |
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| 0020 | \$ TO 43745 FEBRUARY 2020 WARNING |
| 13 | Sent To BARRINGTON WEBB |
| 7019 | Street and A: MARGATE, FL 33068-1729 |
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| J | PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions |

| 9430 | U.S. Postal Service [™] CERTIFIED MAIL® RECEIPT Domestic Mail Only |
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| 13 | \$ 521 SW 62 TERRACE |
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| 427 | U.S. Postal Service [™] CERTIFIED MAIL [®] RECEIPT Domestic Mail Only |
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| | Total Postage : TD 43745 FEBRUARY 2020 WARNING |
| - | NOEL JOSE GARCIA |
| 7019 | Sent To 510 SW 62WAY |
| | |
| ' ' | WARGATE, FL 33068-1719 |
| | City, State, ZIP |
| ļ | PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions |

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|--|--|
| 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. | A. Signature X / Augustus B. Received by (Printed Name) C. Date of Delivery Color Veg. |
| 1. Article Addressed to: TD 43745 FEBRUARY 2020 WARNING MURIEL ELIZABETH WILLIAMS 520 SW 62ND WAY MARGATE, FL 33068 | D. Is delivery address different from item 11 ☐ Yes If YES, enter delivery address below: ☐ No |
| 9590 9402 4654 8323 8594 05 2. Article Number (Transfer from service label) 7019 0700 0000 6275 938 | 3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail® Restricted Delivery □ Collect on Delivery □ Collect on Delivery □ Collect on Delivery Restricted Delivery □ all Restricted Delivery □ Signature Confirmation □ Signature Confirmation Restricted Delivery |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | Domestic Return Receipt |

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|--|--|
| 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 mailplece, or on the front if space permits. Article Addressed to: TD 43745 FEBRUARY 2020 WARNING BARRINGTON WEBB 530 SW 62 WAY MARGATE, FL 33068-1729 | A. Signature X |
| 9590 9402 4654 8323 8585 76 2. Article Number (Transfer from service label) 7019 0700 0000 6275 9 | 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Collect on Delivery Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation ☐ Signature Confirmation ☐ Restricted Delivery 3) |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | Domestic Return Process |

| V(X | | |
|--|---|--|
| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY | |
| 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. | A. Signature X | |
| 1. Article Addressed to: TD 43745 FEBRUARY 2020 WARNING CITY OF MARGATE CITY MANAGER'S OFFICE S790 MARGATE BLVD MARGATE, FL 33063 | D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No | |
| 9590 9402 4654 8323 8595 80 2. Article Number (Transfer from service label) 7019 0700 0000 6275 935 | 3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Collect on Delivery □ Collect on Delivery □ Iall □ Iall Restricted Delivery | |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | Domestic Return Receipt | |

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|---|---|
| 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. Article Addressed to: TD 43745 FEBRUARY 2020 WARNING KAY FRANCES FOX 520 S.W. 62ND WAY MARGATE, FL 33068 | A. Signature X |
| 9590 9402 3236 7196 3412 61 2. Article Number (7-7-10-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0 | 3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail® □ Delivery □ 1 Delivery Restricted Delivery □ Signature Confirmation □ Insured Mail Restricted Delivery □ Signature Confirmation □ Restricted Delivery (over \$500) |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | Domestic Return Receipt |

| * 4 | | |
|--|---|--|
| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY | |
| Complete items 1, 2, and 3. | Digital Control | |
| Print your name and address on the reverse so that we can return the card to you. | X () Addressee | |
| Attach this card to the back of the mailpiece, or on the front if space permits. | B. Robert Goldens JAN 1 0 2020 | |
| 1. Article Addressed to: | D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No | |
| TD 43745 FEBRUARY 2020 WARNING | | |
| BROWARD COUNTY CLERK | · | |
| OF THE CIRCUIT COURT | | |
| 201 SE 6TH STREET | | |
| FORT LAUDERDALE, FL 33301 | | |
| | | |
| | 3. Service Type | |
| | ☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted | |
| 9590 9402 3236 7196 3412 85 | ☐ Certified Mail® Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for | |
| | ☐ Collect on Delivery Merchandise | |
| 2. Article Number (Transfer from service Inhan | n Delivery Restricted Delivery ☐ Signature Confirmation ☐ Signature Confirmation ☐ Signature Confirmation | |
| 7019 0700 0000 6275 93 | (over \$500) Restricted Delivery | |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | Domestic Return Receipt | |
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| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY | |
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| Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: TD 43745 FEBRUARY 2020 WARNING BROWARD COUNTY PERMITTING/LICENSING 1 N UNIVERSITY DRIVE BOX 300 PLANTATION, FL 33324 | A. Signature X. Jahrun Juff | |
| 9590 9402 4654 8323 8595 66 2. Article Number (Transfer from service label) 7019 0700 0000 6275 933 | 3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail® □ Collect on Delivery □ Collect on Delivery □ Insured Mail Sestricted Delivery □ Insured Mail Sestricted Delivery □ Return Receipt for Merchandise □ Signature Confirmation □ Signature Confirmation □ Signature Confirmation □ Restricted Delivery □ Restricted Delivery □ Return Receipt for Merchandise □ Signature Confirmation □ Restricted Delivery □ Return Receipt for Merchandise | |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt | | |

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| SENDER: COMPLETE THIS SECTION | COMPLETE THIS S | |
| ■ Complete items 1, 2, and 3. | A. Signature | |
| ■ Print your name and address on the reverse | X Kann Va | ☐ Agent ☐ Addressee |
| so that we can return the card to you. Attach this card to the back of the mailpiece, | B. Received by (Printed No. a) | C. Date of Delivery |
| or on the front if space permits. | Raven Veal | 1/10 |
| Article Addressed to: | D. Is delivery address different fro If YES, enter delivery address | |
| TD 43745 FEBRUARY 2020 WARNING | | |
| KAY FRANCES TAYLOR | | į |
| 520 SW 62ND WAY | l i | |
| MARGATE, FL 33068 | | |
| | | |
| | 3. Service Type □ Adult Signature | ☐ Priority Mall Express® ☐ Registered Mail™ |
| | ☐ Adult Signature Restricted Delivery ☐ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| 9590 9402 4654 8323 8595 97 | ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
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| 7019 0000 0000 P275 93 | ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | ☐ Signature Confirmation Restricted Delivery |
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| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
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| 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. Article Addressed to: TD 43745 FEBRUARY 2020 WARNING NOEL JOSE GARCIA 510 SW 62WAY MARGATE, FL 33068-1719 | A. Signature X. |
| 9590 9402 3236 7196 3414 90 2. Article Number (Transfer from service label) 7019 0700 0000 6275 946 | 3. Service Type |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | Domestic Return Receipt |

| SENDER: COMPLETE THE SECTION | COMPLETE THIS SECTION ON | DELIVERY |
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| Complete items 1, 2, and 3 Print your name and address on the reverse so that we can return the card to you. | A Signature X Mus/ al | Agent Addressee |
| Attach this card to the back of the mailpiece, or on the front if space permits. | B. Received by (Frinted Name) Muricl William | C. Date of Delivery |
| 1. Article Addressed to: | D. Is delivery address different from item 18 les if YES, enter delivery address below: | |
| TD 43745 FEBRUARY 2020 WARNING | | |
| MURIEL WILLIAMS | | |
| 441 MARTIN RD | | |
| MARGATE, FL 33068 | | |
| | | |
| | Service Type Adult Signature | ☐ Priority Mail Express® ☐ Registered Mail™ |
| | ☐ Adult Signature Restricted Delivery ☐ Certified Mail® | ☐ Registered Mall Restricted Delivery |
| 9590 9402 4654 8323 8586 44 | ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery | ☐ Return Receipt for Merchandise |
| 2. Article Number (Transfer from service label) | ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation™ ☐ Signature Confirmation |
| 7019 0700 0000 6275 939 | Mall Restricted Delivery | Restricted Delivery |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | | Domestic Return Receipt |
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| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIV | ERY |
| Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Aridraesed To ALDOUPHUS L. WILLIAMS ALDOUPHUS L. WILLIAMS 441 MARTIN ROAD MARGATE, FL 33068 | B. Received by (Printed Name) D. Is delivery address different from item If YES, enter delivery address below | |
| 9590 9402 4654 8323 8595 73 2. Article Number (<i>Transfer from service label</i>) | ☐ Adult Signature ☐ Re ☐ Adult Signature ☐ Re ☐ Certified Mail® ☐ De ☐ Certified Mail Restricted Delivery ☐ Re ☐ Collect on Delivery ☐ Collect on Delivery ☐ Collect on Delivery ☐ Signatured Mail ☐ Signatured Mail | ority Mail Express® gistered Mail™ gistered Mail Restricted livery turn Receipt for rohandise nature Confirmation™ nature Confirmation |
| 7019 0700 0000 6275 931 | + C) | stricted Delivery |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | | tic Return Receipt |
| 一个工作的现在分词,我们就是一个工作的,我们就是一个工作的。 | 国的基本的企业,1000年1000年1000年,1000年10日,1000年10日的国际企业工程的企业 | 第45年30年30年30日第46時 |

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| 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. Article Addressed to: | B. Received by (Printed Name) D. Science y and see the sent from item 1? Yes If YES, enter delivery address below: |
| TD 43745 FEBRUARY 2020 WARNING BROWARD COUNTY PARKING DIVISION 201 SE 6TH STREET RM 220 FT LAUDERDALE, FL 33301 | |
| 9590 9402 3236 7196 3412 92 | 3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail Restricted Delivery □ Collect on Delivery □ Collect on Delivery Restricted Delivery □ Collect on Delivery Restricted Delivery □ Collect on Delivery Restricted Delivery □ Signature Confirmation™ |
| 2. Article Number (Transfer from service label) 7019 0700 0000 6275 93 | Mail Signature Confirmation |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | Domestic Return Receipt |

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| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DE | LIVERY |
| 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. Article Addressed to: TD 43745 FEBRUARY 2020 WARNING MARC GARRY TOUSSAINT 521 SW 62 TERRACE MARGATE, FL 33068-1740 | A. Signature X. Low | |
| 9590 9402 3236 7196 3414 83 2. Article Number (Transfer from service label) 7019 0700 0000 6275 943 | □ 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 Return Receipt for Merchandise Signature Confirmation™ Signature Confirmation Restricted Delivery |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | - Annual Control of the Control of t | nestic Return Receipt |

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| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SI CTION ON DELIVERY |
| 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. | A. Signature X. Karen Vell Agent B. Received by (Printed Name) C. Date of Delivery |
| Article Addressed to: | D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No |
| TD 4374掌FEBRUARY 2020 WARNING ALDOUPHUS WILLIAMS AND MURIEL WILLIAMS 520 SW 62 WAY MARGATE, FL 330681 | |
| 9590 9402 3236 7196 3411 24 | 3. Service Type ☐ Priority Mail Express®☐ Registered Mail™☐ Restricted Delivery☐ Certified Mail®☐ ☐ Retricted Delivery☐ Collect on Delivery☐ Collect on Delivery☐ ☐ Return Receipt for Merchandise☐ |
| 2. Article Number (Transfer from service label) 7015 0140 0000 6236 863 | ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation ☐ Signature Confirmation |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | Domestic Return Receipt |

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| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
| 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. Article Addressed to: TD 43745 FEBRUARY 2020 WARNING KAY TAYLOR 1,20 SW 62ND WAY MARGATE, FL 33068 | A. Signature X |
| 9590 9402 3236 7196 3412 54 2. Article Number (Transfer from service label) 7019 0140 0000 6236 864 | <u>(σναι φοσ</u> υ) |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | Domestic Return Receipt |

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| ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 1 Article Addressed to: TD 437-35 FEBRUARY 2020 MURIEL E. WILLIAMS 520 SW 62ND WAY MARGATE, FL 33068 | A. Signature X A A A A A A A A A |
| \$90 9402 3236 7196 3412 78 **Ster from service label) 9000 6275 930 | 3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail Restricted Delivery □ Collect on Delivery □ Collect on Delivery □ Insured Mail □ Insured Mail Restricted Delivery □ Insured Mail Express® □ Registered Mail Pactricted Delivery □ Insured Mail Express® □ Registered Mail Pactricted Delivery □ Insured Mail Express® □ Registered Mail Pactricted Delivery □ Insured Mail Express® □ Registered Mail Pactricted Delivery □ Insured Mail Express® □ Registered Mail Pactricted Delivery □ Insured Mail Express® □ Registered Mail Pactricted Delivery □ Insured Mail Pactricted Delivery □ Insured Mail Pactricted Delivery □ Insured Mail Express® □ Registered Mail Pactricted Delivery □ Insured Mail Restricted Delivery □ Insured Mail Pactricted Delivery |
| 0053 | Domestic Return Receipt |

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| Complete items 1, 2, and 3. | A. Signature | □ Agent 7 | |
| Print your name and address on the reverse so that we can return the card to you. | X | Addressee | |
| Attach this card to the back of the mallplece, or on the front if space permits. | B. Received by (Printed Name) | C. Date of Delivery | |
| Article Addressed to: | D. Is delivery address different from item 17 ☐ Yes If YES, enter delivery address below: ☐ No | | |
| TD 43745 FEBRUARY 2020 WARNING | . / / | | |
| KAY FRANCES TAYLOR | 01/13/20 | 2 <i>0</i> | |
| 2700 CORONET WAY CHARLOTTE, NC 28208-3457 | | | |
| CHARLOTTE, NC 20200-3437 | | | |
| | 3. Service Type | ☐ Priority Mail Express® | |
| | ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Cartified Mail® | ☐ Registered Mail Testricted ☐ Registered Mail Restricted Delivery | |
| 9590 9402 4654 8323 8593 99 | Certified Mail Restricted Delivery Collect on Delivery | ☐ Return Receipt for Merchandise | |
| 2. Article Number (Transfer from service label) | Collect on Delivery Restricted Delivery | | |
| 7019 0700 0000 6275 937 | 13 fall Restricted Delivery | Restricted Delivery | |
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