

Prepared By and Return To:

JOHN SHEA, JR., ESQ.
Becker & Poliakoff, P.A.
630 S. Orange Ave.
Sarasota, FL 34236

Receipt #: 000000532303-01
Doc Stamp-Deed : 182.00
Karen E. Rushing, Sarasota Co
By: [Signature] D.C.

Tax Parcel ID#2020-12-0018
Grantee SS# _____

TRUSTEE'S DEED

THIS DEED made on this 27 day of Oct, 1997, by EARL D. EDGE, individually and as Trustee of the Vesta I. Calvert Revocable Trust, ("Grantor"), whose post office address is P.O. Box 2065 Venice FL 34284, and JOHN LAMBIE, (the "Grantee"), whose post office address is 1390 Riverside Drive N., Sarasota, FL 34234.

IN CONSIDERATION of Ten and No/100 Dollars (\$10.00) and other good and valuable consideration paid by Grantee, Grantor does hereby remise, release, and forever quitclaim to Grantee that real property located in the County of Sarasota, State of Florida, and more particularly described as follows:

Lot 30A, Block A, RIVERSIDE PARK SUBDIVISION, as per plat thereof recorded in Plat Book 1, page 13, of the Public Records of Sarasota County, Florida.

SUBJECT to easements, restrictions and reservations of record, if any and taxes for the year 1997 and subsequent years.

THIS PROPERTY IS NOT THE HOMESTEAD PROPERTY OF THE GRANTOR NOR IS IT CONTIGUOUS THERETO.

TOGETHER WITH all the estate and rights of Grantor in such property. Grantor does hereby fully warrant the title to the above-described property and will defend the same against the lawful claims of all persons claiming by, through or under Grantor and no other.

IN WITNESS WHEREOF, Grantor has caused this instrument to be signed by its duly authorized representative on the day and year first above written.

Signed, sealed and delivered in our presence,

[Signature]
Witness Signature

John Shea
Print Name of Witness

[Signature]
EARL D. EDGE, individually
and as trustee aforesaid

[Signature]
Witness Signature

Stephanie Robinson
Print Name of Witness

STATE OF FLORIDA
COUNTY OF SARASOTA

The foregoing instrument was acknowledged before me this 27 day of Oct, 1997, by EARL D. EDGE, individually and as trustee aforesaid, who is personally known to me or has produced Drivers Lic. as identification. If no type of identification is indicated, the above-named person is personally known to me.

[Signature]
Notary Public
Printed Name _____
State of Florida
My Commission Expires _____

STEPHANIE ROBINSON
Notary Public State of Florida
My Comm Expires June 4, 1998
Comm No. CC 362800

RECORDED IN OFFICIAL
RECORDS
97 OCT 28 PM 4:45
SARASOTA COUNTY, FL