

Receipt #: 000000423162-02
Doc Stamp-Deed : 0.70
Karen E. Rushing, Sarasota Co
By: Melms D.C.

96047323

DOC TAX \$.70 ✓
RECORD \$ 6.00

275
Prepared by and return to:
James L. Ritchey, Esq./jm
Williams, Parker, Harrison, Dietz & Getzen
1550 Ringling Boulevard
Sarasota, Florida 34236

Deed

This Indenture, made this 15 day of APRIL, 1996, by and between THE GROVE ASSOCIATES, a Florida general partnership, hereinafter referred to as Grantor, whose post office address is 2147-G Porter Lake Dr., Sarasota, FL 34240, and

GROVE POINTE HOMEOWNERS ASSOCIATION, INC., a Florida corporation not for profit hereinafter referred to as Grantee, whose post office address is

P.O. Box 22183, Sarasota, Florida 34276

Witnesseth: Grantor, in consideration of the sum of ten dollars and other valuable considerations to it in hand paid by Grantee, receipt of which is hereby acknowledged, does hereby release, remise and quit claim to Grantee, his heirs and assigns forever, the following described property situate in Sarasota County, Florida:

Tracts A, B, and C, and Parcel A, GROVE POINTE, UNIT 1, as per plat thereof recorded in Plat Book 34, Page 1, Public Records of Sarasota County, Florida.

Subject to restrictions, reservations, and easements of record; applicable governmental regulations; and taxes for the current year.

In Witness Whereof, Grantor has caused this deed to be executed in its name by its undersigned duly authorized partner the date above written.

WITNESSES:

The Grove Associates, a Florida general partnership
By: Kemmons Wilson, Inc., a Tennessee corporation
As General Partner

[Signature]
JAMES L. RITCHIEY
[Signature]
JACQUI MCINTYRE

By: [Signature]
Billy B. Springer
As Vice President

STATE OF FLORIDA
COUNTY OF SARASOTA

The foregoing instrument was acknowledged before me this 23rd day of APRIL 1996 by Billy B. Springer as Vice President of Kemmons Wilson, Inc., a general partner of The Grove Associates, a Florida general partnership on behalf of the partnership. He is personally known to me or has produced _____ as identification. If no type of identification is indicated, the above-named person acknowledged is personally known to me.



[Signature]
Signature of Notary Public JACQUI MCINTYRE
I am a Notary Public of the State of Florida,
and my commission expires on _____

OFFICIAL NOTARY SEAL
JACQUI MCINTYRE
MY COM. EXP. 10-3-97
No. CC320065

RECORDED IN OFFICIAL RECORDS
66 APR 24 PM 4:01