

Prepared by and please return to:

Name _____

Address _____

Rec. \$ _____

Property Appraiser's Parcel

Doc.St. \$ _____

ID No. _____

WARRANTY DEED

[Husband and Wife to Husband and Wife]

Grantors: _____, of the County of _____,

State of _____ and _____,

of the County of _____, State of _____,

Husband and Wife, and

Grantees: _____, whose street address is

_____ in the

County of _____, State of _____ and

_____, whose street address is

_____ in the

County of _____, State of _____, Husband

and Wife, as tenants by the entireties joint tenants with the right of survivorship tenants in

common.

WITNESSETH, that Grantors, for and in consideration of the sum of TEN AND NO/100 DOLLARS

(\$10.00), and other good and valuable consideration to Grantors in hand paid by Grantees, the receipt

whereof is hereby acknowledged, has granted, bargained and sold to Grantees, and Grantee's heirs and

assigns forever, the following described land, situate, lying and being in _____

County, Florida, to-wit:

See Legal Description Attached as Exhibit A incorporated by reference as though set forth in full

Legal Description:

SUBJECT TO:

1. Ad valorem real property taxes for 20_____ and subsequent years.
2. _____
3. _____

and Grantors do hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, the said Grantors have signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in the presence of:

Witness Signature (as to First Grantor)

Printed Name

Witness Signature (as to First Grantor)

Printed Name

Witness Signature (as to Second Grantor)

Printed Name

Witness Signature (as to Second Grantor)

Printed Name

Signature of Grantor

Printed Name

Post Office Address

City, State and Zip

Signature of Grantor

Printed Name

Post Office Address

City, State and Zip

STATE OF FLORIDA, COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of

_____, 20_____, by _____, personally
known or produced identification and type of identification produced: _____.

Notary Public

(Print, type, or stamp commissioned name of Notary Public)

My commission expires: _____

Personally Known _____

OR Produced Identification _____

Type of Identification Produced: _____

STATE OF FLORIDA, COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of
_____, 20_____, by _____, personally
known or produced identification and type of identification produced: _____.

Notary Public

(Print, type, or stamp commissioned name of Notary Public)

My commission expires: _____

Personally Known _____

OR Produced Identification _____

Type of Identification Produced: _____

EXHIBIT A

Grantors:

Grantees:

Parcel Identification Number:

Legal Description: