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MAIL TO:

TICOR TITLE INSURANCE THIS FORM HAS BEEN APPROVED BY THE INDIANA STATE BAR ASSOCIATION FOR USE BY LAWYERS ONLY. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS AND INSERTION OF SPECIAL CLAUSES, CONSTITUTES THE PRACTICE OF LAW AND MAY ONLY BE DONE BY A LAWYER. 102843 Tax Key No.: Mail tax bills to: 272 N. WASHINGTON ST. WARRANTY DEED HOBART, INDIANA 46342 esseth that CHARLES E. TAYLOR AND HARRIETT TAYLOR, HUSBAND AND WIFE LAKE INDIANA County in the State of Convey and warrant to BRIAN C. HENDRIX AND MICHELE C. HENDRIX, HUSBAND AND WIFE of County in the State of for and in consideration of TEN DOLLARS AND OTHER GOOD AND VALUABLE CONSIDERATION the receipt whereof is hereby acknowledged, the following Real Estate in County in the State of Indiana, to wit: The real estate and premises community of Hobart, County of Lake, S wn as 272 N. Washington Street, in the Indiana, and more particularly described as follows, to-wit: Lot 22, except the South & feet thereof, and all of plat 20 of Andrew Melin's 21, in the Office of the Recorder of Lake County, Indiana. Fairfield Addition to Hoba Subject to real estate taxes for 1989 payable in 1990, together with delinquency and penalty, if any, and all real estate taxes due and payable thereafter Subject to recorded liens, encumbrances, easements, restrictions, ditches and drains, highways and legal rights of way, and matters which would be disclosed by an accurate survey or inspection of the premises. Being re-recorded to correct middle initial of grantor's name DULY ENTERED FOR TAXATION SUBJECT TO 🚱 FINAL ACCEPTANCE FOR TRANSFER. DULY PRIMATE FOR TANATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER. MAY 1 7 1990 State of Indiana, County, ss: Before me, the undersigned, a Notary Public in and for said County and State, this day of *19* 90 3rd May Marker personally appeared: CHARLES E. TAYLOR CHARLES E. TAYLOR AND HARRIETT TAYLOR. HUSBAND AND WIFE HARRIETT TAYLOR And acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal. My commission expires, BARBARA J PORTER Resident of County THOMAS K. HOFFMAN, ONE PROFESSIONAL CENTER, CROWN POIN) INDIANA 46307

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