

3  
RECORDED AT  
LAKE COUNTY  
FILED FOR RECORD

2006 015076

2006 FEB 27 AM 9:17

MAIL TAX BILLS TO: David E. Ross, M.D.  
1619 West 5th Avenue  
Gary, IN 46402

MO. DOWN

**CORPORATE WARRANTY DEED**

This indenture witnesseth that **THE METHODIST HOSPITALS, INC.**, a nonprofit corporation organized and existing under the laws of the State of Indiana, of 600 Grant Street, Gary, Lake County in the State of Indiana

Conveys and warrants to **DRR Properties, LLC** of Lake County in the State of Indiana

for an in consideration of Ten Dollars (\$10.00) and other good and valuable consideration, the receipt of which is hereby acknowledged, the following Real Estate in Lake County in the State of Indiana, to-wit:

ALL OF LOTS 1, 2, 3, 4, 5, 6 AND 21 AND THE NORTH 17 FEET OF LOT 20 AND THE NORTH 1/2 VACANT ALLEY ADJACENT IN NON-TAXABLE RIGHT OF WAY, ALL IN BLOCK 20, GARY LAND COMPANY'S FOURTH SUBDIVISION IN THE CITY OF GARY AS RECORDED IN PLAT BOOK 14, PAGE 15 IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA, EXCEPTING THEREFROM THAT PART OF SAID LOT 4 DESCRIBED AS THE EAST 4.17 FEET OF THE SOUTH 76 FEET OF SAID LOT 4, CONTAINING 0.684 ACRES MORE OR LESS.

(More commonly known as 1601 - 1619 West 5th Avenue, Gary, IN 46402)

Subject to:

1. All easements, covenants, assessments and restrictions now of record.
2. All real estate taxes currently due and payable and all subsequent real estate taxes which become due and payable.

The Grantor certifies that there is no Gross Income Tax due as a result of this transfer.

The undersigned persons executing this Deed on behalf of Grantor represent and certify that they are the President and the Secretary of the

**TICOR MO**  
920059903

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER

FEB 24 2006

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

1822  
TI  
B  
003947A

Board of Directors of Grantor and have been fully empowered, by proper resolution of the Board of Directors of Grantor, to execute and deliver this Deed; that Grantor has full corporate capacity to convey the real estate described herein; and that all necessary corporate action for the making of such conveyance has been taken and done.

Dated this            day of February, 2006.

THE METHODIST HOSPITALS, INC.

By: Benjamin T. Luna  
Benjamin T. Luna  
Chairman, Board of Directors

ATTEST:

By: Edward E. Charbonneau  
Edward E. Charbonneau  
Secretary, Board of Directors

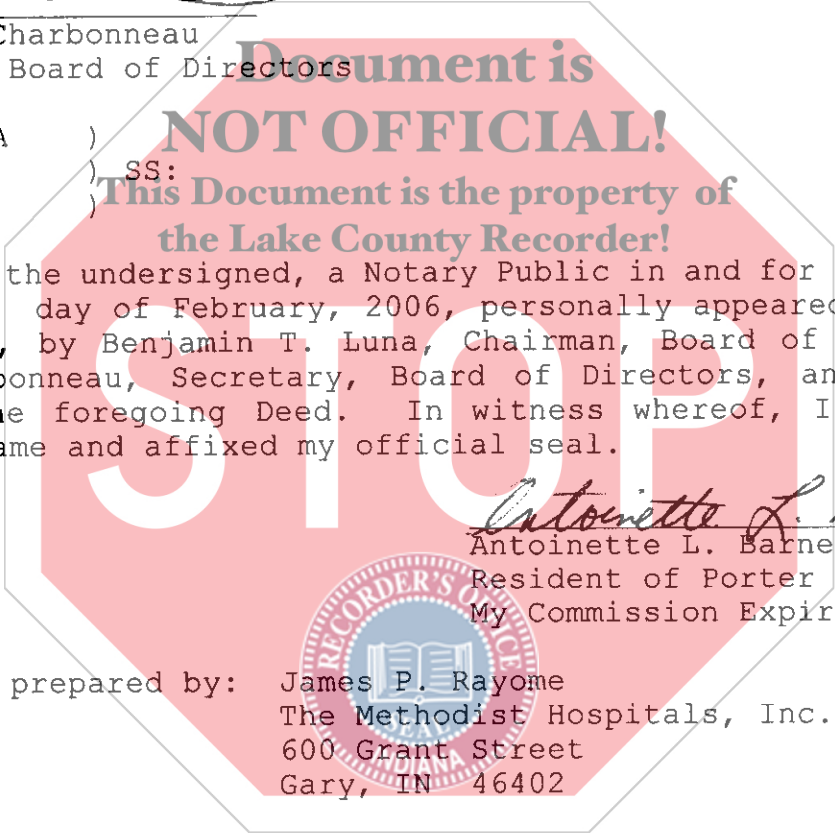
STATE OF INDIANA    )  
                                  )  
COUNTY OF LAKE    )

**Document is NOT OFFICIAL!**  
SS: **This Document is the property of the Lake County Recorder!**

Before me, the undersigned, a Notary Public in and for said County and State, this            day of February, 2006, personally appeared THE METHODIST HOSPITALS, INC., by Benjamin T. Luna, Chairman, Board of Directors, and Edward E. Charbonneau, Secretary, Board of Directors, and acknowledged execution of the foregoing Deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

Antoinette L. Barnett  
Antoinette L. Barnett  
Resident of Porter County  
My Commission Expires: 2/06/08

This instrument prepared by: James P. Rayome  
The Methodist Hospitals, Inc.  
600 Grant Street  
Gary, IN 46402



Declaration

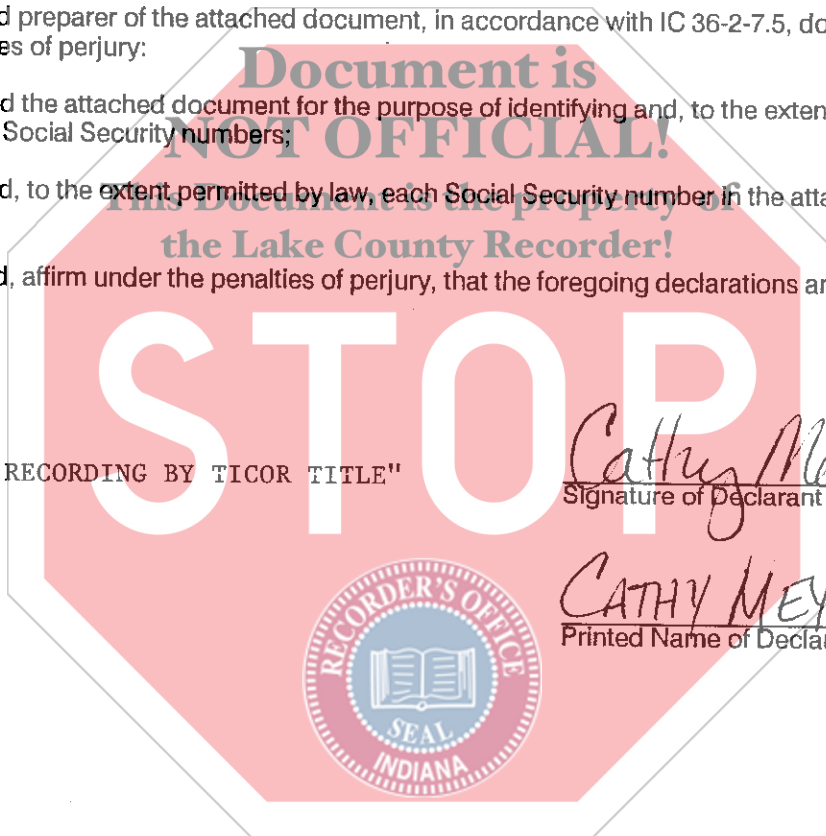
This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do hereby affirm under the penalties of perjury:

1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security numbers;
2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, the undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.

"VERIFIED FOR RECORDING BY TICOR TITLE"



*Cathy Meyer*  
Signature of Declarant

CATHY MEYER  
Printed Name of Declarant