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STATE OF HEMATE LAKE COUNTY FILED FOR RECORD

2007 097644

2007 DEC 13 AM 10: 33

MICHAEL A. BROWN RECORDER

Parcel No. _20-13-0362-000/

WARRANTY DEED

76000958

THIS INDENTURE WITNESSETH, That SIRVA RELOCATION, LLC, A DELAWARE LIMITED LIABILITY COMPANY, (Grantor) of LAKE County, in the State of Indiana, CONVEY(S) AND WARRANT(S) to RICHARD J. BROZOVIC ADD JADICE F. WORVAT (Grantee) of JAKE County, in the State of Local Addition of the sum of Ten Dollars (\$10.00) and other valuable consideration not herein expressed, the receipt and sufficiency of which is hereby acknowledged, the following described real estate in LAKE County, State of Indiana:

Lot 1 in Briar Ridge Country Club Addition Unit 7 Block 4 to the Town of Schererville, as per plat thereof, recorded in Plat Book 57, page 26 in the Office of the Recorder of Lake County,

Indiana.

This Document is the property of
the Lake County Recorder!
Subject to the lien for real property taxes due and payable in 2006 PAY 2007 and thereafter.

Subject to any and all easements, agreements, restrictions, covenants, and mineral exceptions if any of record. The address of such real estate is commonly known as 115 SAINT ANDREWS DRIVE, SCHERERVILLE, IN 46375.



ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

DEC 1 3 2007

PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR \$18 815 Cv

024421

In Witness Whereof, Grantor has executed this deed this 30 day of November 3007.
SIRVA RELOCATION, LLC
STATE OF Delani Shields
COUNTY OF COLOR
Before me, the undersigned, a Notary Public, in and for said County and State, this day of personally appeared with as Control as Co
IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my official seal.
My Commission Expires: This Document is the property of the Lake County Recorder! Notary Public
Residing in County, State ofCounty, State of
(Seal)
This Instrument Prepared By: 100/A R. Morrison 1980 Post Oak Blvd, Ste. 610
Houston, TX 77056
I affirm under the penalties for perjury that I have taken reasonable care to redact each social security number in this document unless required by law. (declarant's name typed)

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