STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2010 051462

2010 SEP -7 PM 2:58

MICHELLE R. FAJMAN
RECORDER

Mail tax bills to: 4088 Westover Dr., Crown Point, IN 46307

PERSONAL REPRESENTATIVE'S DEED

Parcel No.: 45-17-09-328-002.000-044

THIS INDENTURE WITNESSETH, That HENRIETT DEMETRAKIS, AS PERSONAL REPRESENTATIVE OF THE UNSUPERVISED ESTATE OF DENNIS DEMETRAKIS, DECEASED, ("Grantor"), pursuant to his/her power under Indiana law, convey(s) to HENRIETT DEMETRAKIS, ("Grantee"), of Lake County, Indiana, for and in consideration of Ten and 00/100 Dollars ($10.00) and other valuable consideration, receipt of which is hereby acknowledged, the following described real estate situated in Lake County, Indiana, to-wit:

Lot 474, Lake of the Four Seasons, Unit Ten 10, as shown in Plat Book 39, Page 11, in the Recorder's Office of Lake County, Indiana, more commonly known as:

4088 Westover Drive
Crown Point, IN 46307

Subject to all roadways, easements, restrictions of record and taxes.

This property transferred pursuant to proceedings pending in the Lake County Circuit Court, Probate Division, sitting at Crown Point, Indiana, in the matter of the unsupervised estate of Dennis Demetrakis, deceased, Estate No. 45C01-1005-EU-104, Henriett Demetrakis, Personal Representative.

IN WITNESS WHEREOF, said Grantor(s) has/have hereunto set his/her/their hand(s) and seal(s) this 28th day of July, 2010.

DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

SEP 07 2010

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

ATTEST:

Henriett Demetrakis/PR
HENRIETT DEMETRAKIS,
PERSONAL REPRESENTATIVE OF THE
UNSUPERVISED ESTATE OF
DENNIS DEMETRAKIS, DECEASED

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

BEFORE ME, the undersigned, a Notary Public in and for said County and State, personally appeared HENRIETT DEMETRAKIS, AS PERSONAL REPRESENTATIVE OF THE UNSUPERVISED ESTATE OF DENNIS DEMETRAKIS, DECEASED, and as such Personal Representative acknowledge(s) the execution of the foregoing Personal Representative's Deed this 28th day of July, 2010.

My Comm. Exp.: 10 January 2017
Resident of Lake County

Antoinette Krupa
ANTOINETTE KRUPA, NOTARY

I affirm, under the penalties of perjury, that I have taken reasonable care to redact each Social Security Number in this document, unless required by law.
Joseph S. Irak

GRANTEE'S NAME: **HENRIETT DEMETRAKIS**
GRANTEE'S ADDRESS: **4088 WESTOVER DR., CROWN POINT, IN 46307**

This instrument prepared by: JOSEPH S. IRAK, ATTORNEY AT LAW, 9219 Broadway, M'ville, IN 46410 Atty. I.D. #4851-45 (219) 769-4552

Mail To: 4088 Westover Dr., Crown Point, IN 46307

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