

2014 007118

2014 FEB -6 AM 8:59

RELEASE OF LIEN

MICHAEL B. BROWN
RECORDER

For a valuable consideration, the receipt for which is hereby acknowledged, a certain lien existing in favor of LAKES OF THE FOUR SEASONS PROPERTY OWNERS' ASSOCIATION, INC., 1048 Lake Shore Drive, Crown Point, IN 46307 and against:
KRISTINE TEODORI
499 S. COURT ST.
CROWN POINT, IN 46307

on the following described real estate, to-wit:

Lot Numbered 842, in Lakes of the Four Seasons, Unit No. 4, as shown on Plat Book 38, Page 3, in the Recorder's Office of Lake County, Indiana; Commonly known as 3447 Lakeshore Drive, Crown Point, IN 46307

pursuant to a written notice of intention to hold lien filed in the Office of the Recorder of Lake County, State of Indiana, and recorded as Instrument Number 2013-063640 on the 29TH day of AUGUST, 2013, in said County is hereby declared fully satisfied and released this 22ND day of JANUARY, 2014.

The release of lien shall in no way affect the rights of LAKES OF THE FOUR SEASONS PROPERTY OWNERS' ASSOCIATION, INC., to file a lien against the hereinabove described real estate for any assessments which accrue subsequent to the date of the filing of the hereinabove described lien.

Lakes of the Four Seasons
Property Owners' Association, Inc.

By: [Signature]
Theodore A. Fitzgerald, Attorney in Fact

STATE OF INDIANA)
) SS:
COUNTY OF PORTER)



Before me, the undersigned, a Notary Public, in and for said County and State, this 22ND day of JANUARY, 2014, personally appeared Theodore A. Fitzgerald Attorney in Fact for Lakes of the Four Seasons Property Owners' Association, Inc., and for and on its behalf acknowledged the execution of the above and foregoing release.

Witness my hand and notarial seal.

[Signature]
Joanne E. Hansen Notary Public
Resident County: Porter

My Commission Expires: November 8, 2014

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.

This Instrument prepared by : Theodore A. Fitzgerald, P.O. Box 98, Hebron, IN 46341

AMOUNT \$ 12⁰⁰
CASH _____ CHARGE _____
CHECK # 8596
OVERAGE _____
COPY _____
NON-COM _____
CLERK gq rm