

# SATISFACTION OF MORTGAGE

## HERNANDO COUNTY, FLORIDA HOMEOWNERSHIP PROGRAM DOWN PAYMENT ASSISTANCE PROGRAM

KNOWN ALL MEN BY THESE PRESENTS: HERNANDO COUNTY, FLORIDA, whose address is 20 North Main Street, Brooksville, FL 34601, the owner and holder of a certain Mortgage executed by Dru D. Tschoepe & Amy N. Lynn (an unmarried couple) to HERNANDO COUNTY, FLORIDA, dated July 21, 2017, recorded in O.R. Book 3492, Page 68, in the Public Records of HERNANDO COUNTY, FLORIDA, securing a certain note in the principal sum of Twelve Thousand Five Hundred Twenty Four Dollars and 20/100 (\$12,524.00), and certain promises and obligations set forth in said Mortgage, upon the property in HERNANDO COUNTY, FLORIDA, as follows:

ADDRESS: 19187 Fort Dade Avenue, Brooksville, FL 34601

LEGAL: The portion of the West 85.00 feet of the Southeast 1/4 of the Southwest 1/4 of the Northwest 1/4 of Section 21, Township 22 South, Range 19 East, Hernando County, Florida, lying along and 118.70 feet North of the northerly right-of-way line of Old State Road No. 50 (Fort Dade Avenue).

PARCEL ID#: R21 422 19 0000 0460 0000; Key No. 353726

Hereby acknowledges full payment and satisfaction of said Mortgage, and surrenders the same as canceled, and hereby directs the Clerk of the Circuit Court of HERNANDO COUNTY, FLORIDA, to cancel same of record.

WITNESS this hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

BOARD OF COUNTY COMMISSIONERS  
HERNANDO COUNTY, FLORIDA

STATE OF FLORIDA  
COUNTY OF HERNANDO

\_\_\_\_\_  
Print Name: \_\_\_\_\_  
Chairman, Board of County Commissioners

The foregoing instrument was acknowledged before me by means of \_\_\_ physical presence or \_\_\_ online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_, as Chairman of the Hernando County Board of County Commissioners, who is personally known to me or who has produced \_\_\_\_\_ as identification.

ATTEST:

\_\_\_\_\_  
Douglas A. Chorvat, Jr., Clerk of the Circuit Court

\_\_\_\_\_  
(Signature of person taking acknowledgment)

\_\_\_\_\_  
(Name typed, printed, or stamped)

\_\_\_\_\_  
(Title or rank)

\_\_\_\_\_  
(Serial number, if any)

Approved for Form and Legal Sufficiency:

By:   
County Attorney's Office