

# 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 **Scott J. Aldrich and Catherine L. Aldrich (a married couple)** to **HERNANDO COUNTY, FLORIDA**, dated **April 13, 2007** recorded in O.R. Book **2436**, Pages **799**, in the Public Records of **HERNANDO COUNTY, FLORIDA**, securing a certain note in the principal sum of **Thirty-Two Thousand Dollars and 00/100 (\$32,000.00)**, and certain promises and obligations set forth in said Mortgage, upon the property in **HERNANDO COUNTY, FLORIDA**, as follows:

**ADDRESS:** 13024 Innsbruck Rd, Weeki Wachee, FL 34613

**LEGAL:** Lot 7, Block 414, ROYAL HIGHLANDS, UNIT NO. 6, according to the plat thereof, as recorded in Plat Book 12, Page 67 through 79, inclusive, of the Public Records of Hernando County, Florida.

**PARCEL ID#:** R01 221 17 3350 0414 0070

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 \_\_\_\_\_, 2024.

**BOARD OF COUNTY COMMISSIONERS  
HERNANDO COUNTY, FLORIDA**

STATE OF FLORIDA  
COUNTY OF HERNANDO

\_\_\_\_\_  
Print Name: Elizabeth Narverud  
Chairperson

The foregoing instrument was acknowledged before me by means of \_\_\_ physical presence or \_\_\_ online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 2024, by Elizabeth Narverud, as Chairperson 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: Victoria Anderson  
County Attorney's Office