

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 Arther L. & Debra K. Frazier (a married couple) to **HERNANDO COUNTY, FLORIDA**, dated January 28, 1999 recorded in O.R. Book 1248, Page 744, in the Public Records of **HERNANDO COUNTY, FLORIDA**, securing a certain note in the principal sum of Five Thousand Dollars and 00/100 (\$5,000.00), and certain promises and obligations set forth in said Mortgage, upon the property in **HERNANDO COUNTY, FLORIDA**, as follows:

ADDRESS: 215 STAFFORD STREET, BROOKSVILLE, FL 34601

LEGAL: 1AC IN SE1/4 OF NW1/4 ORB 244 PG 146 LESS RD R/W ORB 1248 PGS 729-734. UPDATED ON 01/01/2003.

PARCEL ID#: R22 422 19 0000 0120 0000

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 _____, 2022.

BOARD OF COUNTY COMMISSIONERS
HERNANDO COUNTY, FLORIDA

Print Name: Steve Champion
Chairman, Board of County Commissioners

ATTEST:

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

STATE OF FLORIDA
COUNTY OF HERNANDO

The foregoing instrument was acknowledged before me by means of ___ physical presence or ___ online notarization this _____ day of _____, 2022, by Steve Champion, as Chairman of the Hernando County Board of County Commissioners, who is personally known to me or who has produced _____ as identification.

(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