

Notice to Tax Collector of Application for Tax Deed

TO: Tax Collector of Escambia County

In accordance with Florida Statutes, I,

**US BANK, AS C/F FL DUNDEE LIEN
LOCKBOX # 005191
PO BOX 645191
CINCINNATI, Ohio, 45264**

holder of the following tax sale certificate hereby surrender same to the Tax Collector and make tax deed application thereon:

Certificate No.	Parcel ID Number	Date	Legal Description
1701.0000	03-0218-000	06/01/2011	22-1S3-024 LT 3 BLK 16 OR 2393 P 701 OLIVE MANOR PB 1 P 7

2012 TAX ROLL

JOHNSON ROBERT L EST OF
C/O VANESSA BROOKS
8001 ATILLA AVE
PENSACOLA , Florida 32534

I agree to pay all delinquent taxes, redeem all outstanding certificates not in my possession, pay any omitted taxes, and pay current taxes, if due, covering the land, and pay any interest earned (a) on tax certificates not in my possession, (b) on omitted taxes or (c) on delinquent taxes. I also agree to pay all Tax Collector's fees, ownership and encumbrance reports costs, Clerk of the Court costs, charges and fees and Sheriff's costs, if applicable. Attached is the above-mentioned tax sale certificate on which this application is based and all other certificates of the same legal description which are in my possession.

glfunl (Jacob Prince)
Applicant's Signature

07/28/2013
Date

TAX COLLECTOR'S CERTIFICATION

Application
Date / Number
Jul 28, 2013 / 130452

This is to certify that the holder listed below of Tax Sale Certificate Number **2011 / 1701.0000**, issued the **1st** day of **June, 2011**, and which encumbers the following described property located in the County of Escambia, State of Florida to wit: **Parcel ID Number: 03-0218-000**

Certificate Holder:

US BANK, AS C/F FL DUNDEE LIEN
LOCKBOX # 005191
PO BOX 645191
CINCINNATI, OHIO 45264

Property Owner:

JOHNSON ROBERT L EST OF
C/O VANESSA BROOKS
8001 ATILLA AVE
PENSACOLA, FLORIDA 32534

Legal Description: 22-1S3-024

LT 3 BLK 16 OR 2393 P 701 OLIVE MANOR PB 1 P 7

has surrendered same in my office and made written application for tax deed in accordance with Florida Statutes. I certify that the following tax certificates, interest, ownership and encumbrance report fee, and Tax Collector's fees have been paid:

CERTIFICATES OWNED BY APPLICANT AND FILED IN CONNECTION WITH THIS TAX DEED APPLICATION:

Cert. Year	Certificate Number	Date of Sale	Face Amt	T/C Fee	Interest	Total
2011	1701.0000	06/01/11	\$114.45	\$0.00	\$44.64	\$159.09

CERTIFICATES REDEEMED BY APPLICANT OR INCLUDED (COUNTY) IN CONNECTION WITH THIS APPLICATION:

Cert. Year	Certificate Number	Date of Sale	Face Amt	T/C Fee	Interest	Total
2013	1271.0000	06/01/13	\$120.01	\$6.25	\$6.00	\$132.26
2012	1459.0000	06/01/12	\$122.06	\$6.25	\$23.80	\$152.11
2010	1677	06/01/10	\$117.34	\$6.25	\$65.12	\$188.71


- Total of all Certificates in Applicant's Possession and Cost of the Certificates Redeemed by Applicant or Included (County)
- Total of Delinquent Taxes Paid by Tax Deed Application
- Total of Current Taxes Paid by Tax Deed Applicant
- Ownership and Encumbrance Report Fee
- Tax Deed Application Fee
- Total Certified by Tax Collector to Clerk of Court
- Clerk of Court Statutory Fee
- Clerk of Court Certified Mail Charge
- Clerk of Court Advertising Charge
- Sheriff's Fee
-
- Total of Lines 6 thru 11
- Interest Computed by Clerk of Court Per Florida Statutes.....(%)
- One-Half of the assessed value of homestead property. If applicable pursuant to section 197.502, F.S.
- Statutory (Opening) Bid; Total of Lines 12 thru 14
- Redemption Fee
- Total Amount to Redeem

\$632.17
\$0.00
\$150.00
\$75.00
\$857.17
\$857.17
\$6.25

*Done this 28th day of July, 2013

TAX COLLECTOR, ESCAMBIA COUNTY, FLORIDA

By



Date of Sale:

3/3/14

* This certification must be surrendered to the Clerk of the Circuit Court no later than ten days after this date.

OFFICE of VITAL STATISTICS

CERTIFIED COPY

RCD Oct 03, 2000 02:01 PM
Escambia County, FloridaOR BK 4612 PG0040
Escambia County, Florida
INSTRUMENT 2000-776029Ernie Lee Magaha
Clerk of the Circuit Court
INSTRUMENT 2000-776029CERTIFICATE OF DEATH
FLORIDA

9 | 0 6 2 0 8 5

LOCAL FILE NO. 1316			1. DECEDENT'S NAME			2. SEX		
FIRST VONCELL			MIDDLE JOHNSON			LAST FEMALE		
3. DATE OF DEATH (Month, Day, Year) JUNE 21, 1991			4. SOCIAL SECURITY NUMBER [REDACTED]			5a. AGE-Last Birthday (years) 57		5b. UNDER 1 YEAR Months Days
6. DATE OF BIRTH (Month, Day, Year) DECEMBER 22, 1933			7. BIRTHPLACE (City and State or Foreign Country) BURNT CORN, ALABAMA			8. WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes or No) NO		
9a. PLACE OF DEATH (Check only one: see instructions on other side) HOSPITAL: <input type="checkbox"/> Inpatient <input type="checkbox"/> Outpatient <input type="checkbox"/> DCA <input checked="" type="checkbox"/> OTHER: <input checked="" type="checkbox"/> Nursing Home <input type="checkbox"/> Residence <input type="checkbox"/> Other (Specify)			9b. INSIDE CITY LIMITS? (Yes or No) YES			9c. COUNTY OF DEATH ESCAMBIA		
10a. FACILITY NAME (If not institution, give street and number) MAGNOLIA NURSING HOME			10b. CITY, TOWN, OR LOCATION OF DEATH PENSACOLA			10c. SURVIVING SPOUSE (If wife, give maiden name) ROBERT L. JOHNSON, SR.		
10d. DECEDENT'S USUAL OCCUPATION CUSTODIAN			10e. KIND OF BUSINESS/INDUSTRY SCHOOL			10f. MARITAL STATUS — Married, Never Married, Widowed, Divorced (Specify) MARRIED		
13a. RESIDENCE — STATE FLORIDA			13b. COUNTY ESCAMBIA			13c. CITY, TOWN, OR LOCATION PENSACOLA		
13d. INSIDE CITY LIMITS? (Yes or No) NO			13e. ZIP CODE 32534			13f. STREET AND NUMBER 8000 ATILLA AVENUE		
14. WAS DECEDENT OF HISPANIC OR HAITIAN ORIGIN? (Specify No or Yes — If yes, specify Mexican, Cuban, Mexican, Puerto Rican, etc.) Specify: NO			15. RACE — American Indian, Black, White, etc. Specify: BLACK			16. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary College (1-4 or 5+) 6TH		
17. FATHER'S NAME (First, Middle, Last) JOHN WATSON			18. MOTHER'S NAME (First, Middle, Maiden Surname) LATHAN MIDDLETON					
19a. INFORMANT'S NAME (Type/Print) VANESSA ANN BROOKS			19b. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code) 8001 ATILLA AVENUE PENSACOLA, FLORIDA 32534					
20a. METHOD OF DISPOSITION <input checked="" type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Removal from State <input type="checkbox"/> Donation <input type="checkbox"/> Other (Specify)			20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) EASTERN GATE MEMORIAL GARDEN			20c. LOCATION — City or Town, State PENSACOLA, FLORIDA		
21a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH Willie J. Junior			21b. LICENSE NUMBER (of Licensee) 1880			21c. NAME AND ADDRESS OF FACILITY/JUNIOR FUNERAL HOME 609 NORTH ALCANIZ STREET PENSACOLA, FLORIDA 32501		
22a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) as stated. (Signature and Title) Paula B. Montgomery MD			22b. DATE SIGNED (Mo., Day, Yr.) 6/24/91			22c. HOUR OF DEATH 5:05 P M		
22d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)			23a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner as stated. (Signature and Title) Patricia Seligman, Deputy			23b. DATE SIGNED (Mo., Day, Yr.) JUN 25 1991		
23c. HOUR OF DEATH M			23d. PRONOUNCED DEAD (Mo., Day, Yr.)			23e. PRONOUNCED DEAD (Hour) M		
24. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, MEDICAL EXAMINER) (Type or Print) DR. PAULA B. MONTGOMERY 4400 BAYOU BOULEVARD PENSACOLA, FLORIDA 32503								
25a. SUBREGISTRAR — SIGNATURE AND DATE			25b. LOCAL REGISTRAR — SIGNATURE Patricia Seligman, Deputy			25c. DATE REGISTERED JUN 25 1991		

THIS IS A CERTIFIED TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE

BY

SEP 15 2000

C. Frank Briggs
State Registrar

WARNING:

12135684

THIS DOCUMENT IS PRINTED ON SECURITY PAPER WITH A WATERMARK OF THE GREAT SEAL OF THE STATE OF FLORIDA. DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATERMARK.

THE DOCUMENT FACE CONTAINS A MULTI-COLORED BACKGROUND AND GOLD EMBOSSED SEAL. THE BACK CONTAINS SPECIAL LINES WITH TEXT AND SEALS IN THERMOCHROMIC INK.

DON FORM 1004 (1/95)

FLORIDA DEPARTMENT OF
HEALTH

CERTIFICATION OF VITAL RECORD

VOID IF ALTERED OR ERASED

VOID IF ALTERED OR ERASED

OFFICE of VITAL STATISTICS

CERTIFIED COPY

OR BK 4612 PG0041
Escambia County, Florida
INSTRUMENT 2000-776030Ernie Lee Magaha
Clerk of the Circuit Court
INSTRUMENT 2000-776030RCD Oct 03, 2000 02:01 pm
Escambia County, FloridaCERTIFICATE OF DEATH
FLORIDA

00 003942

LOCAL FILE NO. 055

1 DECEDENT'S NAME		FIRST Robert	MIDDLE Leslie	LAST Johnson	2 SEX Male	
3 DATE OF DEATH (Month, Day, Year) January 10, 2000		4 SOCIAL SECURITY NUMBER [REDACTED]		5a AGE-Last Birthday (years) 67	5b UNDER 1 YEAR Months Days	5c UNDER 1 Day Hours Minutes
6 DATE OF BIRTH (Month, Day, Year) August 27, 1932		7 BIRTHPLACE (City and State or Foreign Country) Burnt Corn, Alabama			8 WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes or No) NO	
9a PLACE OF DEATH (Check only one - see instructions on other side) HOSPITAL <input type="checkbox"/> Inpatient <input type="checkbox"/> ER/Outpatient <input type="checkbox"/> DOA <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Nursing Home <input checked="" type="checkbox"/> Residence <input type="checkbox"/> Other (Specify)					9b INSIDE CITY LIMITS? (Yes or No) NO	
10 FACILITY NAME (If not institution, give street and number) 8001 Atilla Avenue			11 CITY, TOWN, OR LOCATION OF DEATH Pensacola		12 COUNTY OF DEATH Escambia	
10a DECEDENT'S USUAL OCCUPATION Custodian		10b KIND OF BUSINESS/INDUSTRY Educational		11 MARITAL STATUS - Married, Never Married, Widowed, Divorced (Specify) Widowed		12 SURVIVING SPOUSE (If wife, give maiden name)
13a RESIDENCE - STATE Florida		13b COUNTY Escambia		13c CITY, TOWN, OR LOCATION Pensacola		13d STREET AND NUMBER 8001 Atilla Avenue
14 INSIDE CITY LIMITS? (Yes or No) No		15 ZIP CODE 32534		16 WAS DECEDENT OF HISPANIC OR HAITIAN ORIGIN? (Specify No or Yes - If yes, specify Mexican, Puerto Rican, etc.) No		17 RACE - American Indian, Black, White, etc. Specify Black
18 DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary 6th		19 FATHER'S NAME (First, Middle, Last) Ceasar Johnson		20 MOTHER'S NAME (First, Middle, Maiden Surname) Roseanna Jacobs		
21 INFORMANT'S NAME (Type/Print) Vanessa Brooks		22 MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code) 8001 Atilla Avenue, Pensacola, Florida 32534				
23 METHOD OF DISPOSITION <input checked="" type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Removal from State <input type="checkbox"/> Donation <input type="checkbox"/> Other (Specify)		24 PLACE OF DISPOSITION (Name of cemetery, crematory or other place) Eastern Gate Cemetery			25 LOCATION - City or Town, State Pensacola, Florida	
26 SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH [Signature]		27 LICENSE NUMBER (of licensee) #1880		28 NAME AND ADDRESS OF FACILITY Junior Funeral Home-609 North Alcaniz St. Pensacola, FL 32501		
29a To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) as stated (Signature and Title) [Signature]		29b DATE SIGNED (Mo., Day, Yr.) 1/12/00		29c HOUR OF DEATH 12:30 P. M.		29d NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)
30 NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, MEDICAL EXAMINER) (Type or Print) Dr. Frank Messina-5149 North 9th Avenue, Pensacola, Florida 32504		31 SUBREGISTRAR - SIGNATURE AND DATE [Signature]		32 LOCAL REGISTRAR - SIGNATURE [Signature]		33 DATE REGISTERED JAN 13 2000

THIS IS A CERTIFIED TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE

BY

SEP 19 2000

C. M. Briggs
State RegistrarWARNING:
11389323

THIS DOCUMENT IS PRINTED ON SECURITY PAPER WITH A WATERMARK OF THE GREAT SEAL OF THE STATE OF FLORIDA. DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATERMARK. THE DOCUMENT FACE CONTAINS A MULTI-COLORED BACKGROUND AND GOLD EMBOSSED SEAL. THE BACK CONTAINS SPECIAL LINES WITH TEXT AND SEALS IN THERMOCHROMIC INK.

FLORIDA DEPARTMENT OF
HEALTH

DOH FORM 100 (10/99)

CERTIFICATION OF VITAL RECORD

OR60042393PC 701

DOC. 60.00
SUR. 5.00
REC. 7.00

WARRANTY DEED
(Statutory - Sec. 689.02 F.S.)

This instrument was prepared by:

[Signature]
FLORIDA TITLE COMPANY
P. O. BOX 12651, PENSACOLA, FLA.
IN CONNECTION WITH THE
ISSUANCE OF TITLE INSURANCE.

STATE OF FLORIDA
COUNTY OF ESCAMBIA

KNOW ALL MEN BY THESE PRESENTS: That
RONALD D. BLUE, SR. AND ELEANOR R. BLUE, husband and wife

Grantor*,
for and in consideration of Ten Dollars (\$10.00) and other good and valuable considerations the receipt of
which is hereby acknowledged has bargained, sold, conveyed and granted unto
ROBERT L. JOHNSON AND VONCEIL JOHNSON, husband and wife

Grantee*
Address: 8000 Atrilla, Pensacola, FL 32514
grantee's heirs, executors, administrators and assigns, forever, the following described property, situate, lying
and being in the County of Escambia, State of Florida, to-wit:

Lots one(1), Two(2), Three(3) and Four(4) in Block Sixteen(16), Olive Manor
being a subdivision of the South Nine Hundred Ninety (990) feet of Lot 2,
Section 22, Township 1 South, Range 30 West, Escambia County, Florida, recorded
in Plat Book 1 at page 7, in the public records of said Escambia County,
Florida.

D.S. PD. \$ 60.00
DATE 5-7-87
JOE A. FLOWERS, COMPTROLLER
BY *[Signature]* D.C.
CERT. REG. #59-2043328-27-01

MAY 7 4 24 PM '87
FEDERAL RESERVE BANK
PENSACOLA, FLORIDA
544273

and said grantor does fully warrant the title to said land and will defend the same against the lawful claims of
all persons whomsoever.

*Wherever used herein, the term "grantor/grantors" shall include the heirs, personal repre-
sentatives, successors and assigns of the respective parties herein; the use of singular
numbers shall include the plural, and the plural the singular. The use of any gender shall
include all genders.

April 28, 1987

IN WITNESS WHEREOF, grantor has hereunto set grantor's hand and seal on

Signed, sealed and delivered
in the presence of:

[Signature]
[Signature]

Ronald D. Blue, Sr. (SEAL)
Ronald D. Blue, Sr.

Eleanor R. Blue (SEAL)
Eleanor R. Blue

(SEAL)

(SEAL)

STATE OF Florida
COUNTY OF Escambia
Before me the subscriber personally appeared
Ronald D. Blue, Sr. and Eleanor R. Blue

known to me, and known to me to be the indi-
vidual described by said name in and who executed
the foregoing instrument and acknowledged that, as
grantor, executed the same for the uses and purposes
therein set forth.

Given under my hand and seal on
April 28, 1987

(SEAL)

[Signature]
Notary Public
My Commission Expires 4-12-89

RETURN TO:
FLORIDA TITLE COMPANY
P. O. BOX 12651
PENSACOLA, FLORIDA 32514
FTC # 87-908792

SOUTHERN GUARANTY TITLE COMPANY

4400 BAYOU BLVD., SUITE 13-B, CORDOVA SQUARE

PENSACOLA, FLORIDA 32503

TEL. (850) 478-8121 FAX (850) 476-1437

Email: rcsgr@aol.com

Janet Holley
Escambia County Tax Collector
P.O. Box 1312
Pensacola, FL 32596

CERTIFICATION: TITLE SEARCH FOR TDA

TAX DEED SALE DATE: March 3, 2014

TAX ACCOUNT NO.: 03-0218-000

CERTIFICATE NO.: 2011-1701

In compliance with Section 197.256, Florida Statutes, the following is a list of names and addresses of those persons, firms and/or agencies having legal interest in or claim against the above described property. The above referenced tax sale certificate is being submitted as proper notification of tax deed sale.

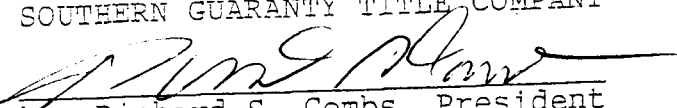
YES NO

 X Notify City of Pensacola, P.O. Box 12910, 32521
221 Palafox Place, 4th Floor/
X Notify Escambia County, 190 Governmental Center, 32502
 X Homestead for tax year.

Beneficiaries and Heirs of the
Estate of Robert Leslie Johnson
c/o Vanessa Brooks
8001 Atilla Ave.
Pensacola, FL 32534

Certified and delivered to Escambia County Tax Collector,
this 10th day of September, 2013.

SOUTHERN GUARANTY TITLE COMPANY


by: Richard S. Combs, President

NOTE: The above listed addresses are based upon current information available, but said addresses are not guaranteed to be true or correct.

**OWNERSHIP AND ENCUMBRANCE REPORT
CONTINUATION PAGE**

File No.: 10664

August 29, 2013

UNSATISFIED MORTGAGES, LIENS AND JUDGMENTS AFFECTING THE LAND COVERED BY THIS REPORT THAT APPEAR OF RECORD:

1. MSBU Lien filed by Escambia County recorded in O.R. Book 4313, page 1173.
2. Taxes for the year 2009-2012 delinquent. The assessed value is \$5,130.00. Tax ID 03-0218-000.

PLEASE NOTE THE FOLLOWING:

- A. Subject to current year taxes.
- B. Taxes and assessments due now or in subsequent years.
- C. Subject to Easements, Restrictions and Covenants of record.
- D. Encroachments, overlaps, boundary line disputes, and any other matters which would be disclosed by an accurate survey and inspection of the premises.
- E. Oil, gas and mineral or any other subsurface rights of any kind or nature.

**OWNERSHIP AND ENCUMBRANCE REPORT
LEGAL DESCRIPTION**

File No.: 10664

August 29, 2013

Lot 3, Block 16, Olive Manor, Plat Book 1, Page 7, O.R. Book 2393, page 701.

Southern Guaranty Title Company

4400 Bayou Boulevard, Suite 13B

Pensacola, Florida 32503

Telephone: 850-478-8121

Facsimile: 850-476-1437

OWNERSHIP AND ENCUMBRANCE REPORT

File No.: 10664

August 29, 2013

Escambia County Tax Collector

P.O. Box 1312

Pensacola, Florida 32569

Pursuant to your request, the Company has caused a search to be made of the Public Records of Escambia County, Florida, solely as revealed by records maintained from 08-29-1993, through 08-29-2013, and said search reveals the following:

1. THE GRANTEE(S) OF THE LAST DEED(S) OF RECORD IS:

Estate of Robert L. Johnson

2. The land covered by this Report is:

LEGAL DESCRIPTION IS ATTACHED HERETO AND MADE A PART HEREOF

3. The following unsatisfied mortgages, liens and judgments affecting the land covered by this Report appear of record:

SEE CONTINUATION PAGE ATTACHED HERETO AND MADE A PART HEREOF

4. Taxes:

SEE CONTINUATION PAGE ATTACHED HERETO AND MADE A PART HEREOF

The foregoing report is prepared and furnished for information only, is not intended to constitute or imply any opinion, warranty, guaranty, insurance, or similar assurance as to the status of title, and no determination has been made of the authenticity of any instrument described or referred to herein. The name search for the purposes of determining applicable judgments and liens is limited to the apparent record owner(s) shown herein. No attempt has been made to determine whether the land is subject to liens or assessments which are not shown as existing liens by the public records. The Company's liability hereunder shall not exceed the cost of this Report, or \$1,000.00 whichever is less.

THIS REPORT SHALL NOT BE USED FOR THE ISSUANCE OF TITLE INSURANCE.

Southern Guaranty Title Company

By: 

August 29, 2013

WARNING

THERE ARE UNPAID TAXES ON PROPERTY WHICH YOU OWN OR IN WHICH YOU HAVE A LEGAL INTEREST. THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON March 3, 2014, UNLESS THE TAXES ARE PAID. SHOULD YOU NEED FURTHER INFORMATION CONTACT THE CLERK OF THE CIRCUIT COURT IMMEDIATELY AT THE COUNTY COURTHOUSE IN PENSACOLA, FLORIDA, OR CALL 850-595-3793.

NOTICE OF APPLICATION FOR TAX DEED

NOTICE IS HEREBY GIVEN, That **US BANK, AS C/F FL DUNDEE LIEN** holder of **Tax Certificate No. 01701**, issued the **1st** day of **June, A.D., 2011** has filed same in my office and has made application for a tax deed to be issued thereon. Said certificate embraces the following described property in the County of Escambia, State of Florida, to wit:

LT 3 BLK 16 OR 2393 P 701 OLIVE MANOR PB 1 P 7

SECTION 22, TOWNSHIP 1 S, RANGE 30 W

TAX ACCOUNT NUMBER 030218000 (14-156)

The assessment of the said property under the said certificate issued was in the name of

EST OF ROBERT LESLIE JOHNSON

Unless said certificate shall be redeemed according to law, the property described therein will be sold to the highest bidder at public auction at 9:00 A.M. on the **first** Monday in the month of March, which is the **3rd day of March 2014**.

Dated this 30th day of January 2014.

In accordance with the AMERICANS WITH DISABILITIES ACT, if you are a person with a disability who needs special accommodation in order to participate in this proceeding you are entitled to the provision of certain assistance. Please contact Emily Hogg not later than seven days prior to the proceeding at Escambia County Government Complex, 221 Palafox Place Ste 110, Pensacola FL 32502. Telephone: 850-595-3793.

Personal Services:

EST OF ROBERT LESLIE JOHNSON

**C/O VANESSA BROOKS
8001 ATILLA AVE
PENSACOLA, FL 32534**

**PAM CHILDERS
CLERK OF THE CIRCUIT COURT
ESCAMBIA COUNTY, FLORIDA**



By:
Emily Hogg
Deputy Clerk

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Post Property:

ATILLA AVE 32534



**PAM CHILDERS
CLERK OF THE CIRCUIT COURT
ESCAMBIA COUNTY, FLORIDA**

By:
Emily Hogg
Deputy Clerk

WARNING

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PAM CHILDERS
CLERK OF THE CIRCUIT COURT
ESCAMBIA COUNTY, FLORIDA

By:
Emily Hogg
Deputy Clerk

STATE OF FLORIDA
COUNTY OF ESCAMBIA

CERTIFICATE OF NOTICE OF MAILING
NOTICE OF APPLICATION FOR TAX DEED

CERTIFICATE # 01701 of 2011

I, PAM CHILDERS, CLERK OF THE CIRCUIT COURT OF ESCAMBIA COUNTY, FLORIDA, do hereby
certify that I did on January 30, 2014, mail a copy of the foregoing Notice of Application for Tax Deed, addressed to:

EST OF ROBERT LESLIE JOHNSON C/O VANESSA BROOKS 8001 ATILLA AVE PENSACOLA, FL 32534	ESCAMBIA COUNTY OFFICE OF COUNTY ATTORNEY 221 PALAFOX PLACE STE 430 PENSACOLA FL 32502
--	---

WITNESS my official seal this 30th day of January 2014.

PAM CHILDERS
CLERK OF THE CIRCUIT COURT
ESCAMBIA COUNTY, FLORIDA



By:
Emily Hogg
Deputy Clerk



7008 1830 0000 0243 8932

U.S. Postal Service TM	
CERTIFIED MAIL TM RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ <u>48</u>
Certified Fee	<u>3.50</u>
Return Receipt Fee (Endorsement Required)	<u>2.50</u>
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ <u>6.49</u>
<div> <div>Sent</div> <div> <div>Street, Apt. or PO Box</div> <div>City, State</div> </div> </div> <div> <div>ESCAMBIA COUNTY [14-156]</div> <div>OFFICE OF COUNTY ATTORNEY</div> <div>221 PALAFOX PLACE STE 430</div> <div>PENSACOLA FL 32502</div> </div>	
PS Form 3849	Postmark Here

7008 1830 0000 0243 8925

U.S. Postal Service TM	
CERTIFIED MAIL TM RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ <u>48</u>
Certified Fee	<u>3.50</u>
Return Receipt Fee (Endorsement Required)	<u>2.50</u>
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ <u>6.49</u>
<div> <div>Sent To</div> <div> <div>Street, Apt. or PO Box</div> <div>City, State</div> </div> </div> <div> <div>EST OF ROBERT LESLIE JOHNSON</div> <div>[14-156]</div> <div>C/O VANESSA BROOKS</div> <div>8001 ATILLA AVE</div> <div>PENSACOLA, FL 32534</div> </div>	
PS Form 3849	Postmark

11/1701

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ESCAMBIA COUNTY [14-156]
OFFICE OF COUNTY ATTORNEY
221 PALAFOX PLACE STE 430
PENSACOLA FL 32502

ADDRESSEE: COMPLETE THIS SECTION

A. Signature

x *C. Schwab*

☒ Agent

☐ Addressee

B. Received by (Printed Name)

2/3/14

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☒ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7008 1830 0000 0243 8932

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

11/1701

WARNING

THERE ARE UNPAID TAXES ON PROPERTY WHICH YOU OWN OR IN WHICH YOU HAVE A LEGAL INTEREST. THE PROPERTY WILL BE SOLD AT PUBLIC AUCTION ON March 3, 2014, UNLESS THE TAXES ARE PAID. SHOULD YOU NEED FURTHER INFORMATION CONTACT THE CLERK OF THE CIRCUIT COURT IMMEDIATELY AT THE COUNTY COURTHOUSE IN PENSACOLA, FLORIDA, OR CALL 850-595-3793.

NOTICE OF APPLICATION FOR TAX DEED

NOTICE IS HEREBY GIVEN, That US BANK, AS C/F FL DUNDEE LIEN holder of Tax Certificate No. 01701, issued the 1st day of June, A.D., 2011 has filed same in my office and has made application for a tax deed to be issued thereon. Said certificate embraces the following described property in the County of Escambia, State of Florida, to wit:

LT 3 BLK 16 OR 2393 P 701 OLIVE MANOR PB 1 P 7

SECTION 22, TOWNSHIP 1 S, RANGE 30 W

TAX ACCOUNT NUMBER 030218000 (14-156)

The assessment of the said property under the said certificate issued was in the name of

EST OF ROBERT LESLIE JOHNSON

Unless said certificate shall be redeemed according to law, the property described therein will be sold to the highest bidder at public auction at 9:00 A.M. on the first Monday in the month of March, which is the 3rd day of March 2014.

Dated this 30th day of January 2014.

In accordance with the AMERICANS WITH DISABILITIES ACT, if you are a person with a disability who needs special accommodation in order to participate in this proceeding you are entitled to the provision of certain assistance. Please contact Emily Hogg not later than seven days prior to the proceeding at Escambia County Government Complex, 221 Palafox Place Ste 110, Pensacola FL 32502. Telephone: 850-595-3793.

Post Property:

ATILLA AVE 32534



PAM CHILDERS
CLERK OF THE CIRCUIT COURT
ESCAMBIA COUNTY, FLORIDA

By:
Emily Hogg
Deputy Clerk

RECEIVED
JAN 31 A 10:28
CLERK OF THE CIRCUIT COURT
ESCAMBIA COUNTY, FL

ESCAMBIA COUNTY SHERIFF'S OFFICE
ESCAMBIA COUNTY, FLORIDA
NON-ENFORCEABLE RETURN OF SERVICE

Document Number: ECSO14CIV004473NON

Agency Number: 14-004335

Court: TAX DEED

County: ESCAMBIA

Case Number: CERT # 01701 2011

Attorney/Agent:

PAM CHILDERS
CLERK OF COURT
TAX DEED

Plaintiff: RE: EST OF ROBERT LESLIE JOHNSON

Defendant:

Type of Process: NOTICE OF APPLICATION FOR TAX DEED

Received this Writ on 1/31/2014 at 10:28 AM and served same at 8:38 AM on 2/3/2014 in ESCAMBIA COUNTY, FLORIDA, by serving POST PROPERTY , the within named, to wit: , .

POSTED TO PROPERTY PER INSTRUCTIONS FROM CLERK'S OFFICE.

DAVID MORGAN, SHERIFF
ESCAMBIA COUNTY, FLORIDA

By: _____


J. BARTON, CPS

Service Fee: \$40.00
Receipt No: BILL

Printed By: JLBRYANT

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Personal Services:

EST OF ROBERT LESLIE JOHNSON

C/O VANESSA BROOKS

8001 ATILLA AVE

PENSACOLA, FL 32534

PAM CHILDERS

CLERK OF THE CIRCUIT COURT

ESCAMBIA COUNTY, FLORIDA



By:
Emily Hogg
Deputy Clerk

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EST OF ROBERT LESLIE JOHNSON

**C/O VANESSA BROOKS
8001 ATILLA AVE
PENSACOLA, FL 32534**

**PAM CHILDERS
CLERK OF THE CIRCUIT COURT
ESCAMBIA COUNTY, FLORIDA**



By:
Emily Hogg
Deputy Clerk

RECEIVED
JAN 31 A 10:30
CLERK OF THE CIRCUIT COURT
ESCAMBIA COUNTY, FL
UNIT

ESCAMBIA COUNTY SHERIFF'S OFFICE
ESCAMBIA COUNTY, FLORIDA
NON-ENFORCEABLE RETURN OF SERVICE

Document Number: ECSO14CIV004548NON

Agency Number: 14-004394

Court: TAX DEED

County: ESCAMBIA

Case Number: CERT # 01701 2011

Attorney/Agent:

PAM CHILDERS
CLERK OF COURT
TAX DEED

Plaintiff: RE: EST OF ROBERT LESLIE JOHNSON

Defendant:

Type of Process: NOTICE OF APPLICATION FOR TAX DEED

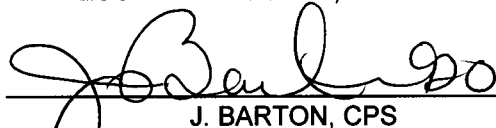
Non-Executed

Received this Writ on 1/31/2014 at 10:30 PM and after a diligent search in ESCAMBIA COUNTY, FLORIDA for EST OF ROBERT LESLIE JOHNSON , Writ was returned to court UNEXECUTED on 2/10/2014 for the following reason:

AFTER NUMEROUS ATTEMPTS, UNABLE TO MAKE CONTACT WITH SUBJECT PRIOR TO SERVE BY DATE. NO ADDITIONAL INFORMATION GAINED THROUGH DUE DILIGENCE EFFORTS.

DAVID MORGAN, SHERIFF
ESCAMBIA COUNTY, FLORIDA

By: _____



J. BARTON, CPS

Service Fee: \$40.00
Receipt No: BILL

Printed By: JLBRYANT

CLERK C.
OFFICIAL RECORDS DIVISION
221 Palafox Place
P.O. Box 333
Pensacola, FL 32591-0333

neopost®
01/31/2014
US POSTAGE
\$06.48⁰⁰
FIRST-CLASS MAIL

CLERK OF DISTRICT COURT
ESCAMBIA COUNTY, FL
ZIP 32502
04111221084

FEB 23 1964

MAILROOM

LECTURE BY ROBERT LESLIE JOHNSON

14-1561

C/O VANESSA
8001 ATH
PENSACOLA

W
H
X
H
N

372 DE 1009 0002/23/14

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

*7087-11495-31-40

1
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 11
 12

09-07-2016

11/1701