THIS INSTRUMENT PREPARED BY: **PERCY WILKINS, JR. and CHRISTY WILKINS IVEY, Attorneys**
2210 Crestmoor Road, Nashville, Tennessee 37215-0157

ADDRESS NEW OWNER:
Ernest F. Hackney, Sr.
446 American Road
Nashville, TN 37209

SEND TAX BILLS TO:
Atlantic Coast Mortgage Company
3819 S. George Mason Dr., Suite G
Baileys Crossroads, VA 22041

MAP-PARCEL NUMBERS:
MAP 90-16
PARCEL 293
8DA-30415

WARRANTY DEED

BOOK 6577 PAGE 804

For and in consideration of the sum of Ten Dollars, cash in hand paid by the hereinafter named Grantee, and other good and valuable consideration, the receipt of which is hereby acknowledged, John Paul Jones, unmarried, hereinafter called the Grantor, has bargained and sold, and by these presents does transfer and convey unto Ernest F. Hackney, Sr. and wife, Jannis L. Hackney hereinafter called the Grantee, Grantee's heirs and assigns, a certain tract or parcel of land in Davidson County, State of Tennessee, described as follows: To-Wit:

LAND in Davidson County, Tennessee, being Lot No. 95 on the plan of Charlotte Park, Section I, of record in Book 2663, pages 2-6, inclusive, Register's Office for said County.

SAID Lot No. 95 fronts 70.0 feet on the northeasterly margin of American Road and extends back 122.0 feet on the northwesterly line and 221.7 feet on the southeasterly line to a dead line in the rear, measuring 123.5 feet thereon.

BEING the same property conveyed to John Paul Jones and wife, by deed from W. Allen Oaks, M.D. and wife, Kimi S. Oaks, of record in Book 4831, page 748, Register's Office for Davidson County, Tennessee.

Inasmuch as the referenced deed conveyed to the Grantor "and wife" without reciting the name of the "wife", the Grantor hereby represents and warrants that his wife at the time of execution and delivery of the deed was Alberta Hyder Jones, and that she has since died, thus vesting full ownership in the Grantor as surviving tenant by the entireties. A copy of the death certificate of Alberta Hyder Jones is attached as an Exhibit to this instrument and incorporated herein by reference.

The property herein conveyed is subject to restrictive covenants of record in Book 2638, page 490, said Register's Office, and to the matters set forth in the above referenced plan of record.

This instrument is executed on behalf of John Paul Jones by John W. Jones as his Attorney in Fact pursuant to a Power of Attorney of record in Book 6521, page 512, Register's Office for Davidson County, Tennessee. The affidavit of said attorney in fact is attached as an exhibit to this deed and incorporated herein by reference.

This is (un)improved property, known as 446 American Road, Nashville, TN 37209.

TO HAVE AND TO HOLD the said tract or parcel of land, with the appurtenances, estate, title and interest thereto belonging to the said Grantee, Grantee's heirs or assigns, forever; and Grantor covenants with the said Grantee that Grantor is lawfully seized and possessed of said land in fee simple, has a good right to convey it, and the same is unencumbered, unless otherwise herein set out; and Grantor further covenants and binds Grantor, Grantor's heirs and representatives, to warrant and forever defend the title to the said land to the said Grantee, Grantee's heirs and assigns, against the lawful claims of all persons whomsoever. (As to a corporate or partnership party, the reference to "heirs" shall be deemed to read "successors.")

Witness the execution hereof this 7th day of June, 1985.

John Paul Jones
BY: John W. Jones, Attorney in Fact

$1.50 CHECK IDENTIFICATION REFERENCE JUN 10 11 31 AM '85 WILSON II REGISTER DAVIDSON COUNTY TN

STATE OF TENNESSEE
COUNTY OF _____

On this _____ day of _____, 19___, before me personally appeared _____, to me known (or proved to me on the basis of satisfactory evidence) to be the person(s) described in and who executed the foregoing instrument, and acknowledged that _he_ executed the same as _____ free act and deed.

My Commission Expires: _____

Notary Public

STATE OF TENNESSEE
COUNTY OF _____

BOOK 6577 PAGE 805

Before me, the undersigned, of the State and County aforesaid, personally appeared _____, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who, upon oath, acknowledged ____self to be the President (or other officer authorized to execute the instrument) of the _____ _____, the within named bargainor, a corporation, and that he as such _____, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation by ____self as _____. Witness my hand and official seal, at office in _____, Tennessee, this _____ day of _____, 19___.

My Commission Expires:_____ _____
Notary Public

STATE OF TENNESSEE
COUNTY OF Davidson

The actual consideration or value, whichever is greater, for this transfer is $ 64,000.00.

Jannis F. Hackney
Affiant

Subscribed and sworn to before me, this the 7th day of June, 19 85.

My Commission Expires: Nov 1, 1987

Christy Wilkins Ivey
Notary Public

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me, the undersigned, a Notary Public in and for said County and State, the within named John W. Jones, with whom I am personally acquainted, or proved to me on the basis of satisfactory evidence, and who acknowledged that he executed the within instrument on behalf of John Paul Jones, as his Attorney in Fact as the free act and deed of the within named John Paul Jones.

Witness my hand and official seal at Nashville, Tennessee, this the 7th day of June, 1985.

Christy Wilkins Ivey
NOTARY PUBLIC

My commission expires: Nov 1, 1987

WARRANTY DEED

from:
John Paul Jones

to:
Ernest F. Hackney, Sr. and wife,
Jannis L. Hackney

return to: box 8 jcb
PERCY WILKINS, JR.
and
CHRISTY WILKINS IVEY
Attorneys at Law
2210 Crestmoor Road
P.O. Box 150157
Nashville, Tennessee 37215-0157

TN-23703

[redacted]

BOOK 6577 PAGE 806

STATE OF TENNESSEE

COUNTY OF DAVIDSON

A F F I D A V I T

The undersigned Affiant, being first duly sworn, deposes and says as follows:

1. That the document to which this affidavit is exhibited was executed by the undersigned as attorney-in-fact for the principal thereon shown.

2. That the execution is proper and within the scope of the power-of-attorney referenced in the instrument.

3. That at the time of execution of said document the Affiant had no knowledge or notice of the termination of the power-of-attorney, either by revocation or by the principal's death, disability or incapacity.

Further the Affiant saith not.

Affiant JOHN W. JONES

Sworn to and subscribed before me this 7th day of June, 19 85.

Notary Public

My Commission Expires: Nov 4 1987

NOTARY PUBLIC

Metropolitan Government of Nashville and Davidson County

Richard H. Fulton, Mayor

J. M. BISTOWISH, M.D., REGISTRAR
METROPOLITAN NASHVILLE
AND DAVIDSON COUNTY

MAR 25 1983

J. M. Bistowish M.D.

METROPOLITAN HEALTH DEPARTMENT
311 23rd AVENUE, NORTH
NASHVILLE, TENNESSEE 37203
(615) 327-9313

This is to certify that this is a true and correct copy of the record filed with the Tennessee Department of Public Health, Vital Records, by the Metropolitan Health Department of Nashville and Davidson County.

This is valid only when the seal of the Metropolitan Health Department of Nashville and Davidson County is affixed.

BOOK 6577 PAGE 807

CERTIFICATE OF DEATH

TENNESSEE DEPARTMENT OF PUBLIC HEALTH
VITAL RECORDS

8301174

THIS BECOMES A LEGAL RECORD WHEN PROPERLY EXECUTED AND FILED.

TYPE OR PRINT IN PERMANENT BLACK INK.

DECEDENT

USUAL RESIDENCE WHERE DECEASED LIVED. IF DEATH OCCURRED IN INSTITUTION, GIVE RESIDENCE BEFORE ADMISSION.

PARENTS AND INFORMANTS

PERMIT REQUIRED PRIOR TO TRANSPORTATION OF BODY BY COMMON CARRIER OR REMOVAL FROM STATE.

DISPOSITION

CERTIFIER

IF DEATH NOT ATTENDED BY PHYSICIAN, AUTHORIZED OFFICIAL SIGN HERE. ANY PHYSICIAN OR MEDICAL EXAMINER EXECUTING CERTIFICATE MUST COMPLETE AND SIGN MEDICAL CERTIFICATION WITHIN 48 HOURS. POWER OF SIGNATURE CANNOT BE DELEGATED.

CAUSE

1. NAME: ALBERTA HYDER JONES			2. March 20, 1983
3. AGE: 68	4. DATE OF BIRTH: May 24,1914	5. RACE: White	6. SEX: Female
7. COUNTY OF DEATH: Davidson	8. CITY, TOWN OR LOCATION: Nashville	9. INSIDE CITY LIMITS: Yes	10. HOSPITAL OR OTHER INSTITUTION: St. Thomas Hospital
11. STATE OF BIRTH: Tennessee	12. CITIZEN OF WHAT COUNTRY: U.S.A.	13. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED: Married	14. SURVIVING SPOUSE: John Paul Jones
15. SOCIAL SECURITY NUMBER: [redacted]0-2765	16. SERVICE: No	17. USUAL OCCUPATION: Homemaker	18. KIND OF BUSINESS OR INDUSTRY: Home
19. RESIDENCE—STATE: Tennessee	20. COUNTY: Davidson	21. CITY, TOWN OR LOCATION: Nashville	22. STREET AND NUMBER: 446 American Road
23. FATHER—NAME: Joseph Hyder	24. MOTHER—MAIDEN NAME: Martha Townsend	25. INFORMANT—NAME AND MAILING ADDRESS: John Paul Jones 446 American Rd, Nashville, Tn. 37209	
26. BURIAL, CREMATION, REMOVAL, OTHER (SPECIFY): Burial	27. DATE: March 22,1983	28. CEMETERY OR CREMATORY—NAME: Calvary Cemetery	29. LOCATION: Lebanon Road Nashville, Tn.
30. FUNERAL DIRECTOR: Jack E. Compton	LICENSE NO.: 2927	EMBALMER: Billy J. Hall	LICENSE NO.: 3810
FUNERAL HOME—NAME AND ADDRESS: Martin & Bracey-Welsh, Inc. 209 Louise Ave. Nashville, Tn. 37203		31. CERTIFIER'S SIGNATURE: Esther D. Gross	DATE RECEIVED BY LOCAL REGISTRAR: 3-25-83
PHYSICIAN—I CERTIFY THAT I WAS IN ATTENDANCE DURING THE ILLNESS OF THE DECEASED, THAT DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSES STATED. SIGNATURE: Philip V. Daugherty		DEGREE: M.D.	DATE SIGNED: Mar 22 1983
MEDICAL EXAMINER—ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR THE AUTOPSY AND/OR, DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSES STATED. SIGNATURE:		TITLE:	DATE SIGNED:
32. CERTIFIER—NAME (TYPED OR PRINTED): Philip V. Daugherty, M. D.	MAILING ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP): Nashville, Tenn.		

33. PART I. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)

IMMEDIATE CAUSE (a)	Carcinoma of Colon	Years
DUE TO, OR AS A CONSEQUENCE OF: (b)		
DUE TO, OR AS A CONSEQUENCE OF: (c)		

PART II. OTHER SIGNIFICANT CONDITIONS: (CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a).)

Hypertension COPD Coronary Heart Disease

AUTOPSY (YES OR NO): No

34. ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY)	35. DATE OF INJURY (MONTH, DAY, YEAR)	36. HOUR	37. DESCRIBE HOW INJURY OCCURRED
38. INJURY AT WORK (SPECIFY YES OR NO)	39. PLACE OF INJURY (e.g., HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY))	40. LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, STATE)	

[redacted]

OFFICIAL RECEIPT
FELIX Z. WILSON, II
REGISTER OF DAVIDSON COUNTY
NASHVILLE, TENNESSEE

RECEIVED OF _____

FOR _____

BOOK 6577 PAGE 808

CO - CONVEYANCE	CC - CERTIFIED COPY	MISC - MISCELLANEOUS
MO - MORTGAGE	REL - RELEASE	CO TX - STATE TAX CONVEY
WD - WARRANTY DEED	UCC - UNIFORM COMMERCIAL CODE	MO TX - STATE TAX MORT
TD - TRUST DEED		PRFEE - PROBATE FEE

DATE	SYMBOL	VALUATION	TAX AND FEES	TOTAL PAID

64000.00- CAMT.
166.40 CSTAX
.50 PRFEE
12.00 WDEED
CHECK 178.90-
6392A06/10/85 BAL .00

RECEIPT IS NOT VALID UNTIL CHECK IS PAID BY BANK

J 1155 2

IDENTIF. REFERENCE

JUN 10 11 39 AM '85

FELIX Z. WILSON II REGISTER
DAVIDSON COUNTY, TN

No. 142859