BOOK 8903 PAGE 447

05492

This instrument prepared by:
Mark A. Rosser, Attorney
Suite 240, 620 Market St.
Knoxville, Tennessee 37902

DFT1 04 01 0101 03CHECK 44.00

IDENTIFICATION REFERENCE:

AFFIDAVIT OF PERSONAL REPRESENTATIVE

APR 1 12 40 PM '93

ALEX Z. WILSON II REGISTER
DAVIDSON COUNTY, TN

STATE OF CALIFORNIA
COUNTY OF STANISLAUS

PICK-UP

BEFORE ME, the undersigned authority, duly authorized to administer oaths and take acknowledgements, personally appeared CYNTHIA COLEMAN STANDARD, who after being by me first duly sworn, says on oath as follows:

1. That she is the daughter of Robert C. Coleman and Betty R. Coleman (one and the same person as Betty Reister Coleman) who obtained a one-third undivided interest in the following described real property located in Davidson County, Tennessee, pursuant to Deeds of record in Deed Book 4122, pages 156 and 289, in the Register's Office for Davidson County, Tennessee:

> **SITUATED in District Six (6) of Davidson County, Tennessee, and being known and designated as Lot No. 4 in the Grayson Industrial Park as shown by plat of record in Plat Book 3842, page 131, in the Register's Office for Davidson County, Tennessee, and being more particularly described as follows:**
>
> **BEGINNING at an iron pin in the Eastern right of way line of Foster Avenue, said iron pin located at the intersection of the former Southern right of way line of the Louisville and Nashville Railroad Company with the Eastern right of way line of Foster Avenue, and now designating the common corner with property of B.R. Chapman as set forth in Deed Book 7930, page 754; thence leaving Foster Avenue North 69 deg. 22 min. 00 sec. East, 45.57 feet to an iron pin; thence North 87 deg. 20 min. 39 sec. East, 309.47 feet to an iron pin; thence South 2 deg. 39 min. 00 sec. West, 342.90 feet to an iron pin; thence North 87 deg. 21 min. 00 sec. West, 350 feet to an iron pin in the Eastern right of way line of Foster Avenue; thence along the Eastern right of way line of Foster Avenue, North 2 deg. 39 min. 00 sec. East, 296.27 feet to an iron pin, the point of BEGINNING, according to survey of H & H Land Surveying, Inc. dated February 10, 1993, and bearing job no. 93-022.**

2. That her father, Robert W. Coleman, died a resident of Knox County, Tennessee, in 1970, leaving her mother, Betty R. Coleman, as surviving tenant by the entirety, her father and mother having remained married from the time they obtained their one-third interest in the aforementioned property until the date of his death.

3. This she is the duly appointed Personal Representative of

the Estate of Betty R. Coleman, Deceased, who died December 8, 1991, a resident of the State of Florida.

4. That a certified copy of the death certificate of Betty R. Coleman is attached to this Affidavit as Exhibit "A."

5. That a certified copy of the Last Will and Testament of Betty R. Coleman is attached to this Affidavit as Exhibit "B," and a certified copy of the Letter of Administration of the affiant is attached hereto as Exhibit "C."

6. That the total value of the estate was not taxable for federal and Florida estate tax purposes, having a value of less than $600,000.00.

7. That a certified copy of the Nontaxable Certificate and Receipt for Estate Tax as issued by the Florida Department of revenue is attached to this Affidavit as Exhibit "D."

8. That the only asset of Betty R. Coleman in the State of Tennessee is the undivided one-third interest in the aforedescribed property.

9. That at the date of death of Betty R. Coleman, the undivided one-third interest in the above described real property was valued at $93,333.33, or less than $100,000.00, and said one-third undivided interest has now been sold at a price of $110,000.00.

10. That no inheritance tax is due the State of Tennessee based on the value of the assets in Tennessee at the date of death of Betty R. Coleman and the total value of the all assets of the estate, wherever located.

11. That Betty R. Coleman died a permanent resident of the State of Florida, conducted all of her business in the State of Florida, had no commercial or consumer contact with the State of Tennessee other than the one-third undivided interest in the above described real property.

12. That an appropriate claims notice was published in the State of Florida; no claims were filed against the estate and there was no debt, consumer, business, tax or otherwise owing at the date of death of Betty R. Coleman.

13. That there is no transaction indebtedness or obligation of any kind whatsoever incurred by Betty R. Coleman prior to her death which could give rise to a lien by a creditor or any governmental authority against the undivided interest in the above described real property in the State of Tennessee.

14. That this Affidavit is given for the purpose of clearing any possible question or objection to title with regard to the one-third undivided interest in the above described property.

FURTHER AFFIANT SAYETH NOT, this 8th day of March, 1993.

Cynthia Coleman Standard
CYNTHIA COLEMAN STANDARD,
Personal Representative of the Estate
of Betty R. Coleman

STATE OF CALIFORNIA
COUNTY OF STANISLAUS

Personally appeared before me, the undersigned authority, a Notary Public, in and for said County and State, CYNTHIA COLEMAN STANDARD, the within named bargainor, with whom I am personally acquainted, and who, upon oath, acknowledged that she executed the within instrument for the purposes therein contained.

Witness my hand and official seal at office, this 8th day of March, 1993.

June 10, 1996
Commission Expiration Date

See attached Notary Acknowledgement
Notary Public

L17/finley.aff

RECORDERS MEMO
LEGIBILITY OF WRITING, TYPING OR PRINTING IN THIS DOCUMENT UNSATISFACTORY WHEN RECEIVED

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT No. 5193

State of California
County of Stanislaus

On 3/8/93 (DATE) before me, Cameron A. Curtis, Notary Public (NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"),
personally appeared * * *Cynthia Coleman Standard* * * * * * (NAME(S) OF SIGNER(S)),

☐ personally known to me - **OR** - ☒ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/~~they~~ executed the same in ~~his~~/her/~~their~~ authorized capacity(~~ies~~), and that by ~~his~~/her/~~their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Cameron A. Curtis
SIGNATURE OF NOTARY

CAMERON A. CURTIS
COMM. #987080
NOTARY PUBLIC-CALIFORNIA
STANISLAUS COUNTY
My Comm. Expires June 10, 1996

OPTIONAL SECTION
CAPACITY CLAIMED BY SIGNER
Though statute does not require the Notary to fill in the data below, doing so may prove invaluable to persons relying on the document.

☐ INDIVIDUAL
☐ CORPORATE OFFICER(S) _____ TITLE(S)
☐ PARTNER(S) ☐ LIMITED ☐ GENERAL
☐ ATTORNEY-IN-FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER: _____

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

OPTIONAL SECTION
THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT:
Though the data requested here is not required by law, it could prevent fraudulent reattachment of this form.

TITLE OR TYPE OF DOCUMENT Warrenty Deed
NUMBER OF PAGES 2 DATE OF DOCUMENT 3/8/93
SIGNER(S) OTHER THAN NAMED ABOVE none

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STATE OF FLORIDA

OFFICE of VITAL STATISTICS EXHIBIT A

CERTIFIED COPY

CERTIFICATE OF DEATH FLORIDA

BOOK 8903 PAGE 450

LOCAL FILE NO. 2614

1. DECEDENT'S NAME: First: Betty	Middle: Reister	Last: Coleman	Suffix: Ramie
3. DATE OF DEATH: December 8, 1991	4. SOCIAL SECURITY NUMBER: [redacted]-5278	5a. AGE-Last Birthday (Years): 68	5b. UNDER 1 YEAR: Months / Days / Hours / Minutes
6. DATE OF BIRTH: April 26, 1923	7. BIRTHPLACE: Asheville, North Carolina	8. WAS DECEDENT EVER IN U.S. ARMED FORCES? No	
9a. PLACE OF DEATH: Hospital ☐ Inpatient ☐ ER/Outpatient ☐ DOA; Other: ☐ Nursing Home ☒ Residence ☐ Other		9b. DID DEATH occur in hospital? No	
9c. FACILITY NAME: 1714 Calle Bonita	9d. CITY, TOWN, OR LOCATION OF DEATH: Pensacola Beach	9e. COUNTY OF DEATH: Escambia	
10a. DECEDENT'S USUAL OCCUPATION: Home Maker	10b. KIND OF BUSINESS/INDUSTRY: Home	11. MARITAL STATUS: Widowed	12. SURVIVING SPOUSE: None
13a. RESIDENCE — STATE: Florida	13b. COUNTY: Escambia	13c. CITY, TOWN, OR LOCATION: Pensacola Beach	13d. STREET AND NUMBER: 1714 Calle Bonita
13e. INSIDE CITY LIMITS? No	13f. ZIP CODE: 32561	14. WAS DECEDENT OF HISPANIC OR HAITIAN ORIGIN? ☒ No ☐ Yes	15. RACE: White
16. EDUCATION: Years in Elementary/Secondary: 12	Years in College: 2		
17. FATHER'S NAME: Junius Elliott Reister	18. MOTHER'S NAME: May Unobtainable		
19a. INFORMANT'S NAME: Nancy Benson	19b. MAILING ADDRESS: 1714 Calle Bonita Pensacola Beach, FL 32561		
20a. METHOD OF DISPOSITION: ☐ Burial ☐ Cremation ☒ Removal from State ☐ Donation ☐ Other	20b. PLACE OF DISPOSITION: Lewis Memorial Park	20c. LOCATION: Asheville, North Carolina	
21a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH: E.H. Cooper	21b. LICENSE NUMBER: 501	21c. NAME AND ADDRESS OF FACILITY: Waters & Hilbert Funeral Home 124 W. Gregory St. Pensacola, FL 32501	
22a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) and manner as stated. Signature and Title: Julian O. Olsen, M.D.		22b. 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:	
22c. DATE SIGNED: December 10, 1991	22d. HOUR OF DEATH: est. Six (6) p.m.	22e. DATE SIGNED	22f. HOUR OF DEATH
22g. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22h. PRONOUNCED DEAD:	22i. PRONOUNCED DEAD:

24. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, MEDICAL EXAMINER): Julian O. Olsen M.D. 8333 North Davis Highway Pensacola, Florida 32514

25a. REGISTRAR — SIGNATURE AND DATE: Cathy Moore 12-10-1991	25b. LOCAL REGISTRAR — SIGNATURE: Faye Sturdivant Chief Deputy	25c. DATE REGISTERED: DEC 12 1991

26. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter only the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line.

IMMEDIATE CAUSE (Final disease or condition resulting in death): a. Cardiac and Respiratory Arrest	DUE TO (OR AS A CONSEQUENCE OF):	a. Minutes
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST. b. Hypertensive Cardiovascular Disease	DUE TO (OR AS A CONSEQUENCE OF):	b. Years
c. Non-insulin Dependent Diabetes Mellitus	DUE TO (OR AS A CONSEQUENCE OF):	c. Years
d.		

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.

27a. WAS AN AUTOPSY PERFORMED? No	27b. WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH?	28. CASE REPORTED TO MEDICAL EXAMINER? Yes

29a. IF FEMALE, WAS THERE A PREGNANCY IN THE PAST 3 MONTHS? ☐ YES ☒ NO

29b. IF SURGERY IS MENTIONED IN PART I or II ENTER CONDITION FOR WHICH IT WAS PERFORMED.

29c. DATE OF SURGERY

31. PROBABLE MANNER OF DEATH RELATED TO CONDITIONS IN PART I ABOVE: Natural	32a. DATE OF INJURY	32b. TIME OF INJURY	32c. INJURY AT WORK?	32d. DESCRIBE HOW INJURY OCCURRED
	32e. PLACE OF INJURY	32f. LOCATION		

HRS Form 1584 (8/88)

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

Faye Sturdivant
Records Administrator

BY: DEC 16 1991

OLIVER H. BOORDE
State Registrar

WARNING: ANY REPRODUCTION OF THIS DOCUMENT IS PROHIBITED BY LAW. DO NOT ACCEPT UNLESS ON SECURITY PAPER WITH COLORED BACKGROUND AND GOLD EMBOSSED GREAT SEAL OF THE STATE OF FLORIDA. ALTERATION OR ERASURE VOIDS THIS CERTIFICATION.

CERTIFICATION OF VITAL RECORD

RECORDERS MEMO
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91-1411-CP-03

"L"

EXHIBIT B

BOOK 8903 PAGE 451

LAST WILL AND TESTAMENT

of

BETTY R. COLEMAN

I, BETTY R. COLEMAN, a resident of Pensacola Beach, Escambia County, Florida, do make, publish and declare this to be my Last Will And Testament, hereby revoking any and all other Wills heretofore made by me:

ITEM ONE

I direct that all of my just debts and funeral expenses, including the cost of any appropriate monument for my gravesite, shall be paid as soon as practicable after my death.

FILED
91 DEC 20 AM 11:11
ERNIE LEE MAGAHA
CIRCUIT COURT
ESCAMBIA COUNTY, FLA.

ITEM TWO

I give and bequeath all of my tangible personal property equally to my children who survive me, less and except those items designated to pass to those persons on a list signed by me and referring to this my Last Will And Testament. If any such list is not found within sixty (60) days from date of appointment of my Personal Representative, then it shall be presumed that there is no such list and any list subsequently discovered shall be ignored.

If tangible personal property of mine passes to a beneficiary who is under the age of 21 years at the date of distribution, I direct that my Personal Representative, or, upon completion of administration of my estate, the guardian of the person of the minor beneficiary, shall have discretion to withhold distribution of such tangible personal property for such minor beneficiary until such time or times as in the discretion of my Personal Representative or the guardian of the person of said minor beneficiary the minor beneficiary may use and enjoy the tangible personal property, but in any event, such distribution shall not be withheld later than the date on which the minor beneficiary attains the age of 21 years.

A direction to my Personal Representative under this Item to distribute my tangible personal property in equal shares shall be considered to mean in approximately equal shares as best my Personal Representative can accomplish, with complete discretion in my Personal Representative to sell or dispose of such items as considered necessary by my Personal Representative to accomplish such equal distribution.

ITEM THREE

I give and devise the rest and residue of my estate, real and personal, in equal shares, per stirpes, to my daughters, CYNTHIA COLEMAN STANDARD, NANCY COLEMAN BENSON and KATHRYN COLEMAN THOMSON.

ITEM FOUR

I nominate and appoint my daughter, CYNTHIA COLEMAN STANDARD, as Personal Representative of this my Last Will And Testament, to serve without bond. In the event my daughter predeceases me or is otherwise unable or unwilling to serve, I nominate and appoint my daughter, NANCY COLEMAN BENSON, as Personal Representative of this my Last Will And Testament, also to serve without bond.

I authorize and empower my Personal Representative to receive, take, recover, hold, manage and control all of the property of my estate and from time to time to invest and reinvest the same and the proceeds and income therefrom in such securities and property and in such manner as my Personal Representative in her absolute discretion may think best or fit; to assign, transfer, lease, rent, exchange, mortgage, repair, rebuild, pledge, sell and convey the property, real and personal, of my estate or any part thereof; to make, execute, acknowledge, and deliver any and all deeds, leases, notes, mortgages and other instruments necessary, proper or convenient in connection therewith; and to do and perform any and all other acts and things necessary which my Personal Representative may deem expedient to carry out any of the purposes herein stated.

RECORDER'S MEMO
LEGIBILITY OF WRITING, TYPING OR PRINTING IN
THIS DOCUMENT UNSATISFACTORY WHEN RECEIVED

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal this the 1st day of February, 1980.

Betty R. Coleman (SEAL)
BETTY R. COLEMAN

The foregoing instrument was on this the 1st day of February, 1980, signed, sealed, published and declared by BETTY R. COLEMAN, in our presence as and for her Last Will And Testament, and we and each of us in her presence and at her special request, and in the presence of each other, hereunto subscribe our names as witnesses to the same.

Robert D. Hart, of Pensacola, Florida.

L. Janeen Kyle, of Pensacola, Florida.

STATE OF FLORIDA
COUNTY OF ESCAMBIA

WE, BETTY R. COLEMAN, ROBERT D. HART, JR. and L. JANEEN KYLE, the testatrix and the witnesses respectively, whose names are signed to the foregoing instrument, having been sworn, declared to the undersigned officer that the testatrix, in the presence of witnesses, signed the instrument as her Last Will, that she signed, and that each of the witnesses, in the presence of the testatrix and in the presence of each other, signed the Will as a witness.

Betty R. Coleman
BETTY R. COLEMAN

Robert D. Hart
WITNESS

L. Janeen Kyle
WITNESS

Subscribed and acknowledged before me by BETTY R. COLEMAN, the testatrix, and by ROBERT D. HART, JR. and L. JANEEN KYLE, the witnesses, on the 1st day of February, 1980.

NOTARY PUBLIC

My commission expires: 11/25/81

92 4 7 9 3

FILED IN THE

Dec 31 | 05 PM '91

IN BOOK AS NOTED ABOVE OF RECORDS COMPTROLLER ESCAMBIA COUNTY

Certified to be a true copy of the original on file in this office
Witness my hand and official seal
ERNIE LEE MAGAHA
Clerk Circuit Court and County Court
Escambia County, Florida
By: Carolyn Roberts D.C.
Date: February 19, 1993

OR BOOK 3105 PG 303

EXHIBIT C
IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT,
IN AND FOR ESCAMBIA COUNTY, FLORIDA
PROBATE DIVISION

IN RE: Estate of
BETTY R. COLEMAN,
Deceased.
_____/

Case Number 91-1411-Cp-03
Division "L"

BOOK 8903 PAGE 455

LETTERS OF ADMINISTRATION

TO ALL WHOM IT MAY CONCERN:

WHEREAS, BETTY R. COLEMAN, a resident of Escambia County, Florida, died on December 8, 1991, owning assets in the State of Florida; and

WHEREAS, CYNTHIA COLEMAN STANDARD has been appointed Personal Representative of the estate of the decedent, and has performed all acts prerequisite to issuance of letters of administration in the estate;

NOW, THEREFORE, I, the undersigned Circuit Court Judge, declare CYNTHIA COLEMAN STANDARD to be duly qualified under the laws of the State of Florida to act as Personal Representative of the Estate of BETTY R. COLEMAN, Deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover, and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

ERNIE LEE MAGAHA
CLERK OF CIRCUIT COURT
ESCAMBIA COUNTY, FLA.
FILED & RECORDED
DEC 27 AM 9:35

WITNESS my hand and the seal of this Court on the 26th day of December, 1991.

924795

FILED FOR RECORD
DEC 31 1991
ERNIE LEE MAGAHA
CLERK OF CIRCUIT COURT

William H Anderson
CIRCUIT COURT JUDGE

Conformed Copy Furnished To:
Robert D. Hart, Jr., Esquire

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BOOK 8903 PAGE 456

STATE OF FLORIDA
ESCAMBIA COUNTY

I, THE UNDERSIGNED Clerk of the Circuit Court, Escambia County, Florida, DO HEREBY CERTIFY the within and foregoing to be a true and correct copy of the original as it appears on record and file in the office of the Clerk of Circuit Court of Escambia County Florida, and the same is in full force and effect.

WITNESS my Hand and Official Seal at Pensacola, Florida, this 17th day of February A.D. 1983

ERNEST L. MAGAHA
Clerk of Circuit and County Courts
Escambia County, Florida
By _____
(Deputy Clerk)

DR-302
R. 05/91 306104

STATE OF FLORIDA
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA 32399-0100

3139 PG 874

J. Thomas Herndon
Executive Director

EXHIBIT D

NONTAXABLE CERTIFICATE AND RECEIPT FOR ESTATE TAX

91-1411-CP-03
"L"

BOOK 8903 PAGE 457

TO: ROBERT D HART JR
P O DRAWER 13010
ESCAMBIA FL 32591-3010

RE: The Estate of [redacted], BETTY R.
Social Security No. [redacted]5278
Date of Death: 12/08/91
Resident of ESCAMBIA
State of FL
Validation Date: 02/26/92
Issue Date: 02/26/92

FILED & RECORDED IN PUBLIC RECORDS OF ESCAMBIA County, FL
92 MAR -3 AM 11:56
ERNIE LEE MAGAHA
CIRCUIT COURT
ESCAMBIA COUNTY, FLA.

CERTIFICATE NUMBER AC82575

THIS IS TO CERTIFY, that in accordance with the provisions of Chapter 198, Florida Statutes, there has been filed with this office a sworn report or return for Estate Taxes as required by law, and on the basis thereof it has been ascertained that the above Estate is not subject to the Florida Estate Tax. The issuance of this Certificate, however, shall not preclude the assessment and collection of Estate Taxes subsequently determined to be due the State of Florida.

If proof of nonliability by the above Estate for the Florida Estate Tax is required by any person, this Certificate may be exhibited as evidence of such nonliability.

Given in triplicate under my hand and the Seal of the State of Florida.

Certified to be a true copy of the original on file in this office
Witness my hand and official seal
ERNIE LEE MAGAHA
Clerk Circuit Court and County Court
Escambia County, Florida
By: Carolyn Roberts D.C.
Date: February 19, 1993

J. Thomas Herndon
J. THOMAS HERNDON, EXECUTIVE DIRECTOR
DEPARTMENT OF REVENUE

941054

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MAR 13 2 27 PM '92
IN BOOK [illegible] PAGE [illegible]
JOE A. FLOWERS, COMPTROLLER
ESCAMBIA COUNTY

02/26/92

14

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