WARRANTY DEED

Davidson County DEEDWARR
Recvd: 03/10/05 13:51 3 pgs
Fees:18.00 Taxes:1054.50

20050310-0026695

STATE OF TENNESSEE
COUNTY OF DAVIDSON

THE ACTUAL CONSIDERATION OR VALUE, WHICHEVER IS GREATER, FOR THIS TRANSFER IS $285,000.00

Affiant

SUBSCRIBED AND SWORN TO BEFORE ME, THIS THE 28TH DAY OF FEBRUARY, 2005.

Notary Public

MY COMMISSION EXPIRES: 7/19/08 (AFFIX SEAL)

NOTARY PUBLIC DEBRA A. KING DAVIDSON COUNTY, TENN. AT LARGE

THIS INSTRUMENT WAS PREPARED BY
Premier Escrow, LLC, 4301 Hillsboro Road, Suite 300, Nashville, TN 37215

ADDRESS NEW OWNER(S) AS FOLLOWS:	SEND TAX BILLS TO:	MAP-PARCEL NUMBERS
Michael T. Hill	same	Map 130-01
(NAME)	(NAME)	
254 Harding Place		Parcel 143.00
(ADDRESS)	(ADDRESS)	
Nashville, TN 37205		
(CITY) (STATE) (ZIP)	(CITY) (STATE) (ZIP)	

FOR AND CONSIDERATION OF THE SUM OF TEN DOLLARS, CASH IN HAND PAID BY THE HEREINAFTER NAMED GRANTEES, AND OTHER GOOD AND VALUABLE CONSIDERATIONS, THE RECEIPT OF WHICH IS HEREBY ACKNOWLEDGED, I, SHIRLEY C. GENTRY, AS EXECUTRIX OF THE **ESTATE OF MILDRED JOHNSON FULGHUM**, HEREINAFTER CALLED THE GRANTOR, HAVE BARGAINED AND SOLD, AND BY THESE PRESENTS DO TRANSFER AND CONVEY UNTO **MICHAEL T. HILL,*** HEREINAFTER CALLED THE GRANTEES, THEIR HEIRS AND ASSIGNS, A CERTAIN TRACT OR PARCEL OF LAND IN DAVIDSON COUNTY, STATE OF TENNESSEE, DESCRIBED AS FOLLOWS, TO-WIT: *and Jennifer Ayer Hill, husband and wife,

Land in Davidson County, Tennessee, being Lot No. 16 on the Map of Bransford Realty Company's Belle Meade Golf Links Subdivision, as of record in Book 421, pages 94 and 95, Register's Office for said County.

Being the same property conveyed to J.H. Gillespie and wife, Virginia E. Gillespie by deed from The Penn Mutual Life Insurance Company, of record in Book 1246, page 228, said Register's Office. The said J. H. Gillespie and wife, Virginia E. Gillespie having since died and devised property herein described to Margaret Austin Gentry, Thelma Austin Campbell, Lucille Smith Orth, and Mildred Johnson Fulghum, hereby Will of record in Will Book 89, page 135, Probate Court for Davidson County, Tennessee. Margaret Austin Gentry, Thelma Austin Campbell, a widow and Lucille Smith Orth, each conveyed their one-fourth (1/4) undivided interest to Mildred Johnson Fulghum and husband, Carl T. Fulghum by deed of record in Book 4273, page 220, Register's Office for Davidson County, Tennessee.

The said Carl T. Fulghum died November 14, 1994 leaving the property solely vested in Mildred Johnson Fulghum by reason of their tenancy by the entirety. The said Mildred Johnson Fulghum has since died. Shirley C. Gentry is the devisee under the will of Mildred V. Fulghum of record in Instrument No. 20050204-0013428, in the Register's Office for Davidson County, Tennessee. (Mildred Johnson Fulghum and Mildred V. Fulghum are one and the same person). The said Shirley C. Gentry has been appointed as Executrix under the will of Mildred V. Fulghum of record as Docket No. 05P61, in the Seventh Circuit Court for Davidson County, Tennessee. Shirley C. Gentry and Shiley C. Gentry are one and the same person.

Shirley C. Gentry in her individual capacity as devisee under the Will of Mildred V. Fulghum, joins in this deed to convey whatever interest she may have in the aforesaid property.

unimproved ☐

This is improved ☒ property, known as 254 Harding Place, Nashville, TN 37205
(House Number) (Street) (P.O. Address) (City or Town) (Postal Zip)

TO HAVE AND TO HOLD the said tract or parcel of land, with the appurtenances, estate, title and interest thereto belonging to the said GRANTEES, their heirs and assigns forever; and we do covenant with the said GRANTEES that we are lawfully seized and possessed of said land in fee simple, have a good right to convey it and the same is unencumbered, unless otherwise herein set out; and we do further covenant and bind ourselves, our heirs and representatives, to warrant and forever defend the title to the said land to the said GRANTEES, their heirs and assigns, against the lawful claims of all persons whomsoever. Wherever used, the singular number shall include the plural, the plural the singular, and the use of any gender shall be applicable to all genders.

Witness my hand this 28th day of February, 2005.

Shirley C. Gentry, Individually

Estate of Mildred V. Fulghum
By: Shirley C. Gentry
Shirley C. Gentry, Executrix

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 Shirley C. Gentry, the bargainor, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence, and who acknowledged that they/he/she executed the within instrument for the purposes therein contained.

Witness my hand and official seal at Nashville, Tennessee this 28th day of February, 2005.

Commission expires:

Notary Public

STATE OF TENNESSEE

COUNTY OF DAVIDSON

Personally appeared before me, the undersigned notary public, Shirley C. Gentry, with whom I am personally acquainted , and who acknowledged that she executed the within instrument for the purposes therein contained, and who further acknowledged that she is the Executrix of the Estate of Mildred V. Fulghum, and who further acknowledged that she is authorized to execute the within instrument as Executrix of said Estate.

Witness my hand and official seal at Nashville, Tennessee this 28th day of February, 2005.

Commission expires:



Notary Public

STATE OF TENNESSEE
Office of Vital Records

#306042 TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT

CERTIFICATE OF DEATH

STATE FILE NUMBER 045367

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): CARL THOMAN FULGHUM
2. SEX: M
3. DATE OF DEATH (Month, Day, Year): 11-14-94
4. SOCIAL SECURITY NUMBER (of Deceased): 415-12-4272
5a. AGE – LAST BIRTHDAY (Years): 72
5b. UNDER 1 YEAR (Months, Days) / 5c. UNDER 1 DAY (Hours, Min.)
6. DATE OF BIRTH (Month, Day, Year): 01-10-22
7. BIRTHPLACE (City and State or Foreign Country): NASHVILLE, TN
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 [X] Yes 2 [ ] No
9a. PLACE OF DEATH (Check only one): HOSPITAL 1 [X] Inpatient 2 [ ] ER/Outpatient 3 [ ] DOA; OTHER 4 [ ] Nursing Home 5 [ ] Residence 6 [ ] Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): BAPTIST HOSPITAL 079
9c. CITY, TOWN, OR LOCATION OF DEATH: NASHVILLE, TN
9d. COUNTY OF DEATH: DAVIDSON
10. MARITAL STATUS – Married, Never Married, Widowed, Divorced (Specify): MARRIED
11. SURVIVING SPOUSE (If wife, give maiden name): MILDRED JOHNSON
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired): CHIEF WARRANT OFFICER
12b. KIND OF BUSINESS/INDUSTRY: U.S. ARMY
13a. RESIDENCE – STATE: TN
13b. COUNTY: DAVIDSON 19
13c. CITY, TOWN OR LOCATION: NASHVILLE 094
13d. STREET AND NUMBER OR RURAL LOCATION: 254 HARDING PLACE
13e. INSIDE CITY LIMITS? 1 [X] Yes 2 [ ] No
13f. ZIP CODE: 37205
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No—If yes, specify Cuban, Mexican, Puerto Rican, etc.) Specify, if yes: [ ] Yes 0 [X] No
15. RACE – American Indian, Black, White, etc. (Specify): WHITE
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12): 12; College (1-4 or 5+):
17. FATHER'S NAME (First, Middle, Last): IRBY SAMUEL FULGHUM, SR.
18. MOTHER'S NAME (First, Middle, Maiden Surname): JIMMY MCGONNIGAL
19a. INFORMANT'S NAME (Type/Print): MILDRED FULGHUM
19b. RELATIONSHIP TO DECEASED: WIFE
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 254 HARDING PLACE NASHVILLE, TN 37205

NAME OF DECEDENT: For use by physician or institution

0456367-1994

DISPOSITION

20a. METHOD OF DISPOSITION: 1 [X] Burial 2 [ ] Cremation 3 [ ] Removal from State 4 [ ] Donation 5 [ ] Other (Specify)
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): WOODLAWN MEMORIAL PARK
20c. LOCATION – City or Town, State: NASHVILLE, TN
21a. SIGNATURE OF FUNERAL DIRECTOR: Emma Gauthier
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 3900
21c. SIGNATURE OF EMBALMER: George Dobbs
21d. LICENSE NUMBER OF EMBALMER: 4337
22a. NAME AND ADDRESS OF FUNERAL HOME: WOODLAWN FUNERAL HOME, 660 THOMPSON LANE, NASHVILLE, TN 37204
22b. LICENSE NUMBER OF FUNERAL HOME: 933

REGISTRAR

23. REGISTRAR'S SIGNATURE: Patricia Sams'
24. DATE FILED (Month, Day, Year): November 29, 1994

CERTIFIER

25a. PHYSICIAN – To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner as stated. 1 [ ] SIGNATURE AND TITLE OF PHYSICIAN: Robert T. Cochran
25b. LICENSE NUMBER: MD003795
25c. DATE SIGNED (Month, Day, Year): 22 NOV 94
26a. MEDICAL EXAMINER – On the basis of examination and/or investigation, in my opinion, death occurred at the time, place, and due to the cause(s) and manner as stated. 2 [ ] SIGNATURE AND TITLE OF MEDICAL EXAMINER
26b. LICENSE NUMBER
26c. DATE SIGNED (Month, Day, Year)

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CERTIFICATE MUST COMPLETE AND SIGN MEDICAL CERTIF.

27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print): Robert T. Cochran, Jr., M.D. 2201 Murphy Ave., #301, Nashville, TN 37203

I hereby certify the above to be a true and correct copy of the original document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Department of Health. Alteration or erasure voids this certification.

Tennessee Code Annotated 68-3-101 et seq., Vital Records Act of 1977.

Sharon M. Leinbach
STATE REGISTRAR

Date Issued Feb-17-2005

THE GREAT SEAL OF THE STATE OF TENNESSEE XVI AGRICULTURE COMMERCE 1796

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD