

AFFIDAVIT

STATE OF FLORIDA)

COUNTY OF)

BEFORE ME, the undersigned authority, personally appeared, who being by me

first duly sworn, on oath, deposes and says:

1. That _____, the owner(s) of the following described property:
Apartment # _____, Coral Ridge Towers East
2. That the above described property is free and clear of all liens, taxes, encumbrances and claims of every kind, nature and description whatsoever, except for real estate and personal property taxes for the year _____.
3. That there have been no improvements, alterations or repairs to the above described property for which the cost thereof remain unpaid, and that there are no claims for labor or material furnished for repairing and improving the same, which remain unpaid, except the following:
4. That there are no mechanic's, materialmen's or laborer's liens against the above described property.
5. That the personal property contained in the buildings on said property, or on the said premises, and which, if any is being sold to the purchaser (s), mentioned below, is also free and clear of all liens, encumbrances, claims and demands whatsoever.
6. That this Affidavit is made for the purpose of inducing _____ to purchase said property from affiant(s).
7. Affiant(s) agree(s) that in the event the current real estate and personal property taxes vary in amount from the figure used in making the prorations in closing the transfer and conveyance of the above described property to the purchaser(s), then a new pro-ration and a correct and proper adjustment will be made upon demand. The undersigned understands that any adjustments are to be made between the buyer and the seller and the corporation is not responsible to any party in connection with these prorations.

8. That no judgment or decree has been entered in any court of this State or the United States against said affiant(s), and which remains unsatisfied.
9. The undersigned is not a foreign person or has not been a United States real property holding corporation as defined in the Internal Revenue Code. Social Security Number is: _____ and _____. Affiant(s) understand that this certification will be disclosed to the Internal Revenue Service.

Affiant(s) further state(s) that _____ is (are each) familiar with the nature of an oath; and with the penalties as provided by laws of the State aforesaid for falsely swearing to statements made in an instrument of this nature. Affiant(s) further certify that _____ has (have) read, or _____ heard read to _____, the full facts of this Affidavit, and understand(s) its context.

SWORN TO AND SUBSCRIBED before me this _____ day of _____, _____.

My commission expires:

NOTARY PUBLIC