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INDX / ANNO / SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

SCAN CHEK



## **COURT OFFICER DEED**

THE IOWA STATE BAR ASSOCIATION
Official Form No. P201
Recorder's Cover Sheet

**Preparer Information:** (Name, address and phone number)

Gregory J. Wilson, 505 5th Avenue, Suite 729, Des Moines, IA 50309, Phone: (515) 283-2147

**Taxpayer Information:** (Name and complete address)

Stan Birchem, Madison Square Assisted Living Corp., P.O. Box 140 Leon, IA 50144

Return Document To: (Name and complete address)

Gregory J. Wilson, 505 5th Avenue, Suite 729, Des Moines, IA 50309, Phone: (515) 283-2147

**Grantors:** 

**Grantees:** 

IN THE MATTER OF THE ESTATE OF EDITH B. AICHELE James Nelson Madison Square Assisted Living Corp.

Legal description: See Page 2

Document or instrument number of previously recorded documents:



## CORRECTED COURT OFFICER DEED

| THE ESTATE OF  |                |                     |                |                |
|--|----------------|---------------------|----------------|----------------|
| EDITH B, AICHELE   |                |                     |                |                |
| ow pending in the lowa District Court  |                |                     |                |                |
| n and for Madison  | Cou            | nty                 | Probate        | No. ESPR012324 |
| Pursuant to the authority and power vesto<br>collar(s) and other valuable consideration<br>below, hereby Convey(s) to<br>Madison Square Assisted Living Corp., | on, the unde   | rsigned,            | in the repre   |                |
| ne following described real estate in  |                | Madis               | son            | County, Iowa:  |
|  |                |                     |                |                |
| ok <u>2009</u> , Page <u>3596</u> of the Madi  | son County ]   | Recorder            | 's Office.     |                |
|  |                |                     |                |                |
|  |                |                     |                |                |
| •  | or neuter gen  | der, accor          |                |                |
| lural number, and as masculine, feminine of  |                | der, accor          |                |                |
| lural number, and as masculine, feminine o   | or neuter gen  | der, accor          |                |                |
| Jural number, and as masculine, feminine of Dated:   | or neuter gen  | 2009                |                |                |
| olural number, and as masculine, feminine of   | cember 29,     | 2009                | ding to the co |                |
| Dated:   | Title  *in the | 2009 James As Execu | ding to the co | ontext.        |

\*Executor, Administrator, Guardian, Conservator, Trustee, Referee, Commissioner, or Receiver

## Acknowledgment for Individuals

| STATE OF             | IOWA                   | , COUNTY OF                          | <u>MADI</u> | SON                                    |                     |                        |
|----------------------|------------------------|--------------------------------------|-------------|--|---------------------|------------------------|
| This instrument      | was acknowledged b     | efore me on December                 | : 29        | , 2009                                 | , by <u>Iames l</u> | Velson                 |
| as Executor          | chele Estate           |                                      |             |  |                     |                        |
| о <u>годин 2. да</u> | RIAL CARLA I           | VASEY<br>imber 196535<br>ion Expires | (           | Paula                                  | J.Vase              | <br>☑<br>Notary Public |
| STATE OF             |                        | , COUNTY OF                          |             |  | <del></del>         |                        |
|                      |                        | efore me on                          |             |  |                     |                        |
| as                   |                        |                                      |             |  |                     |                        |
|                      |                        |                                      |             |  |                     | , Notary Public        |
|                      | A                      | cknowledgment for                    | Corpoi      | ration                                 |                     |                        |
| STATE OF             |                        | , COUNTY OF                          |             |  | <del></del>         |                        |
|                      |                        | efore me on                          |             | ······································ | _, by               |                        |
| as<br>of             | d corporation as fiduc |                                      |             |  |                     |                        |
|                      |                        |                                      | <u></u>     |  |                     | , Notary Public        |
|                      |                        |                                      |             |  |                     |                        |
| STATE OF             |                        | , COUNTY OF                          |             |  |                     |                        |
| This instrument      | was acknowledged b     | efore me on                          |             |  | , by                | <del></del>            |
| as                   |                        |                                      |             |  |                     |                        |
| on behalf of said    | l corporation as fiduc | ary.                                 |             |  |                     |                        |
|                      |                        |                                      | _           |  |                     | Notary Public          |