

This Instrument Prepared By:  
Sam Bridges, Land Rights Coordinator  
City of Gainesville  
Public Works Department, Sta. 58  
P.O. Box 490  
Gainesville, FL 32602-0490

Tax Parcel 6340-010-021 & 6340-010-022  
Section 33, Township 9 South, Range 19 East

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**RELEASE OF EASEMENT**

This Release of Easement executed this \_\_\_\_\_ day of \_\_\_\_\_, 2008, by the CITY OF GAINESVILLE, Florida, a municipal corporation of the State of Florida, whose mailing address is P.O. Box 490, Gainesville, Florida 32602, GRANTOR, and HCA Health Services of Florida, Inc. a Florida corporation, whose mailing address is P.O. Box 750, Nashville, Tennessee 37202, GRANTEE.

WHEREAS, the purpose of this Release of Easement is to release the City of Gainesville's interests in a certain Drainage Easement dedicated by the plat of North Florida Regional Doctors Office Park, Plat book H, page 81 of the Public Records of Alachua County, Florida.

WITNESSETH, That the GRANTOR, for and in consideration of the benefits flowing to the City from improvement of the referenced property, does hereby remise and release forever, all the right, title, interest, claim and demand which the City has by virtue of the above-described easement in and to the following described lot, piece or parcel of land, situated, lying and being in the County of Alachua, State of Florida, to wit:

**LEGAL DESCRIPTION**

*See Exhibit "A" attached hereto, made a part thereof.*

TO HAVE AND TO HOLD the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said Grantor, either in law or equity, to the only proper use, benefit and behoove of the said Grantee forever.

IN WITNESS WHEREOF, the said Grantor has caused these presents to be executed in its name and affixed its seal the day and year first above written.

Signed, sealed & delivered  
In the Presence of:

CITY OF GAINESVILLE, FLORIDA  
A Florida Municipal Corporation

\_\_\_\_\_  
Witness  
Print Name \_\_\_\_\_

\_\_\_\_\_  
Pegeen Hanrahan, Mayor

\_\_\_\_\_  
Witness  
Print Name \_\_\_\_\_

ATTEST:

\_\_\_\_\_  
Kurt M. Lannon, Clerk of the Commission

**STATE OF FLORIDA  
COUNTY OF ALACHUA**

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2008, by Pegeen Hanrahan and Kurt M. Lannon, the Mayor and Clerk of the Commission, respectively, of the City of Gainesville, Florida, a municipal corporation, who are personally known to me and duly sworn, and acknowledged that as such officers, and pursuant to authority from said corporation they executed the foregoing instrument and affixed the corporate seal for and on behalf of said corporation, as its act and deed, and for the uses and purposes set forth and contained in said instrument.

\_\_\_\_\_  
Print Name: \_\_\_\_\_  
Notary Public, State of Florida  
My Commission Expires: