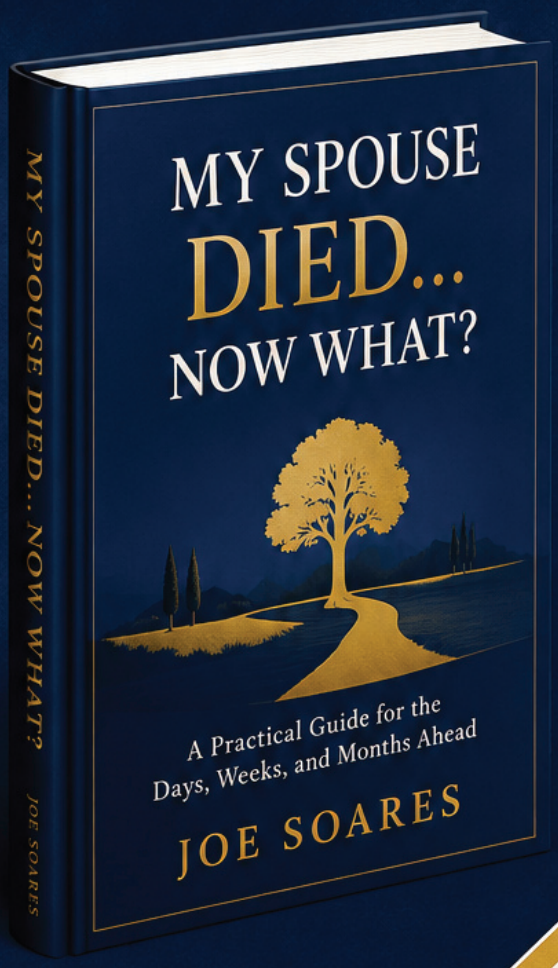
MY SPOUSE DIED... NOW WHAT?



FLORIDA HOME AND PROPERTY

COMPANION RESOURCE

Supplemental Materials

for Florida Property Matters

SUPPLEMENTAL COMPANION RESOURCE

For readers of My Spouse Died... Now What?

JOE SOARES

JoeSoaresMusic.com

This Companion Resource is provided as supplemental material for readers of ***My Spouse Died... Now What?***

These materials are provided for educational and organizational purposes only and are not legal, tax, or financial advice. Laws and government forms change over time. Always verify current requirements with the appropriate government agency or a qualified professional.

JOE SOARES

JoeSoaresMusic.com

DIGITAL ACCOUNT INVENTORY - BLANK WORKSHEET

(PAGE 1 OF 2)

ESTATE INFORMATION

Decedent: _____

Date of Death: _____

Surviving Spouse: _____

Prepared By: _____

Date Prepared: _____

INSTRUCTIONS: List all digital accounts, online services, and subscriptions. Include login or recovery information (stored securely), account purpose, and instructions for access or closure.

#	ACCOUNT / SERVICE (Website or Company)	TYPE OF ACCOUNT (Email, Social Media, Banking, Shopping, Subscription, Cloud, etc.)	USERNAME / ACCOUNT ID	EMAIL ADDRESS USED	PURPOSE / CONTENT (What's Stored or Why Important)	INSTRUCTIONS (Access, Transfer, Keep or Close)	NOTES (Recovery Info Location)	DATE LAST USED
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
15								

TIPS FOR SECURE STORAGE

- Store usernames and passwords in a secure location known to your executor.
- Consider using a password manager and record the master password separately.
- Review and update this inventory at least once a year.
- Indicate which accounts have two-factor authentication enabled.

SUMMARY (Page 1 of 2)

Total Accounts Listed on Page 1: _____

Critical Accounts (Key to Estate): _____

Paid Subscriptions / Services: _____

Accounts to Transfer: _____

Accounts to Close: _____

Additional Pages Used: _____

GRAND TOTAL (Pages 1 & 2)

Total Accounts (Pages 1 & 2): _____

Critical Accounts (Key to Estate): _____

Paid Subscriptions / Services: _____

Accounts to Transfer: _____

Accounts to Close: _____

Total Pages Used: _____

"A good name is rather to be chosen than great riches, and loving favour rather than silver and gold."

PROVERBS 22:1 (KJV)

DIGITAL ACCOUNT INVENTORY – BLANK WORKSHEET

(CONTINUATION)

ESTATE INFORMATION

Decedent: _____

Date of Death: _____

Surviving Spouse: _____

Prepared By: _____

Date Prepared: _____

INSTRUCTIONS: List all digital accounts, online services, and subscriptions. Include login or recovery information (stored securely), account purpose, and instructions for access or closure.

#	ACCOUNT / SERVICE (Website or Company)	TYPE OF ACCOUNT (Email, Social Media, Banking, Shopping, Subscription, Cloud, etc.)	USERNAME / ACCOUNT ID	EMAIL ADDRESS USED	PURPOSE / CONTENT (What's Stored or Why Important)	INSTRUCTIONS (Access, Transfer, Keep or Close)	NOTES (Recovery Info Location)	DATE LAST USED
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								

TIPS FOR SECURE STORAGE

- Store usernames and passwords in a secure location known to your executor.
- Consider using a password manager and record the master password separately.
- Review and update this inventory at least once a year.
- Indicate which accounts have two-factor authentication enabled.

SUMMARY (Page 2 of 2)

Total Accounts Listed on Page 2: _____

Critical Accounts (Key to Estate): _____

Paid Subscriptions / Services: _____

Accounts to Transfer: _____

Accounts to Close: _____

Additional Pages Used: _____

GRAND TOTAL (Pages 1 & 2)

Total Accounts (Pages 1 & 2): _____

Critical Accounts (Key to Estate): _____

Paid Subscriptions / Services: _____

Accounts to Transfer: _____

Accounts to Close: _____

Total Pages Used: _____

"A good name is rather to be chosen than great riches, and loving favour rather than silver and gold." Proverbs 22:1 (KJV)

HOME INFORMATION WORKSHEET

Use this worksheet to record important information about your home and related property details. Keep it with your important documents.

PROPERTY SUMMARY

Date Completed: _____
Property Address: _____
_____
City, State, ZIP: _____
County: _____
Property Type: ☐ Single-Family ☐ Condo ☐ Townhome ☐ Other: _____

INSTRUCTIONS: Fill in all information you can. This will help your family, executor, or trustee manage your property efficiently and avoid delays.

1. OWNERSHIP INFORMATION

Owner(s) Name(s): _____
_____
How Property is Owned: ☐ Sole Ownership ☐ Joint Tenancy ☐ Tenants in Common ☐ Other: _____
Deed Type: ☐ Warranty Deed ☐ Quitclaim Deed ☐ Other: _____
Date Acquired: _____
Purchase Price: $_____
Current Estimated Value: $_____ (Date: _____)
Deed Location: ☐ Safe Deposit Box ☐ Home File ☐ Attorney ☐ Other: _____
Notes: _____
_____
_____

2. MORTGAGE / LOAN INFORMATION

Lender / Servicer: _____
Loan Account Number: _____
Loan Type: ☐ Conventional ☐ FHA ☐ VA ☐ Other: _____
Original Loan Amount: $_____
Current Loan Balance: $_____ (Date: _____)
Interest Rate: _____% Loan Term: _____ years
Monthly Payment: $_____ Due Day: _____
Escrow / Impound Account: ☐ Yes ☐ No
Lender Contact:
Phone: _____ Email: _____
Website / Online Access: _____
Where Loan Documents Are Kept: _____
_____

3. HOME OWNER'S INSURANCE

Insurance Company: _____ Policy Number: _____
Agent Name: _____ Phone: _____
Email: _____ Annual Premium: $_____
Coverage Type: ☐ HO-1 ☐ HO-2 ☐ HO-3 ☐ HO-5 ☐ Other: _____ Policy Expiration Date: _____
Where Policy Documents Are Kept: _____

4. PROPERTY TAX INFORMATION

Tax Parcel / ID Number: _____
Taxing Authority: _____
Annual Property Tax Amount: $_____
Tax Due Dates: _____
Are Taxes Escrowed in Mortgage Payment? ☐ Yes ☐ No
If No, When Are Taxes Due? _____
Where Tax Payments Are Made: _____
_____

5. UTILITIES & SERVICES

SERVICE	PROVIDER	ACCOUNT NUMBER	PHONE / WEBSITE
Electricity			
Water / Sewer			
Natural Gas / Propane			
Trash / Recycling			
Internet / Cable			
Lawn / Landscaping			
Pest Control			
Other:			

6. ADDITIONAL INFORMATION

Home Warranty? ☐ Yes ☐ No Company: _____
If Yes, Policy / Membership #: _____
Expiration Date: _____
Where Documents Are Kept: _____

Special Notes About the Property (repairs, upgrades, access, keys, etc.): _____
_____
_____
_____

Good information today. Peace of mind tomorrow.

Home-Transfer Recording Packet Cover Sheet

Use this cover sheet as the first page of your packet when recording documents with the County Clerk. It helps the clerk quickly identify the documents and ensures nothing is missed.

TIP: Make a copy of the entire packet for your records before submitting.

PROPERTY INFORMATION

Property Address: 1234 Sunshine Drive, Leesburg, FL 34748

Legal Description (if known): See attached deed

Parcel / Tax ID Number: 18-20-24-0000-123-45600

County: Lake County, Florida

GRANTOR (DECEASED SPOUSE)

Full Name: John Michael Sample

Date of Death: March 14, 2024

GRANTEE (SURVIVING SPOUSE)

Full Name: Carol Anne Sample

Relationship: Surviving Spouse

☑ Grantee is the surviving spouse and current owner of the property.

DOCUMENTS INCLUDED IN THIS PACKET

Use this checklist to confirm all required documents are included.

- ☑ Affidavit of Continuous Marriage (Notarized)
- ☑ Death Certificate (Certified Copy)
- ☑ Cover Letter to County Clerk
- ☑ Deed (Completed and Signed)
- ☑ Recording Fee (Check or Money Order)
- ☑ Any Additional Supporting Documents (if applicable) _____
- ☐ Other: _____

PURPOSE

This packet is being submitted to record the deed transferring the above property from the deceased spouse to the surviving spouse, who already owns the property and is adding the property to their name.

NOTES

This transfer is exempt from Florida documentary stamp tax pursuant to Florida Statutes §201.18(6)(a), as the surviving spouse already owns the property and the home is the primary residence.

CONTACT INFORMATION

Your Name: Carol Anne Sample

Address: 1234 Sunshine Drive
Leesburg, FL 34748

Phone: (352) 555-1234

Email: carol.sample@email.com

FOR CLERK USE ONLY

Date Received: _____

Packet Number: _____

Notes: _____

DECLARATION

To the best of my knowledge, this packet contains all required documents to record the deed transferring the above property to me as the surviving spouse.

Signature: Carol Anne Sample Date: May 20, 2024

Keep this cover sheet as the first page of your packet.

AFFIDAVIT OF CONTINUOUS MARRIAGE

STATE OF FLORIDA)
COUNTY OF LAKE)

BEFORE ME, the undersigned authority, personally appeared **Helen Carter**, who being duly sworn, deposes and says:

1. That I was lawfully married to **William "Bill" Carter**, now deceased, on **June 15, 1990**, and that we were husband and wife from that date until his death on **May 7, 2025.**

2. That we continuously resided together as husband and wife and were never legally separated or divorced.

3. That at the time of his death, we jointly owned the real property located at:

1457 Magnolia Pointe Drive
Leesburg, Florida 34748

Legal Description:

Lot 47, of MAGNOLIA POINTE, according to the plat thereof, as recorded in Plat Book 72, Pages 10 through 13, of the Public Records of Lake County, Florida.

4. That said property was owned by us as Tenants by the Entirety, and upon the death of my spouse, full ownership of the property vested in me by operation of law.

FURTHER AFFIANT SAYETH NAUGHT.

Dated this **21st** day of **May, 2025.**

Helen Carter

Helen Carter

Sworn to and subscribed before me this _____ day of _____, 2025, by **Helen Carter**, who is personally known to me or who has produced _____ as identification.

NOTARY PUBLIC
STATE OF FLORIDA
Commission # HH 123456
My Comm. Expires 06/30/2028

_____
Notary Public, State of Florida

My Commission Expires: _____

SAMPLE COVER LETTER

COVER LETTER TO COUNTY CLERK

SUBMITTING AFFIDAVIT OF CONTINUOUS MARRIAGE

FICTIONAL EXAMPLE FOR INSTRUCTIONAL PURPOSES ONLY

This is a fictional example provided for instructional purposes only. The names, addresses, dates, and information shown are entirely fictitious and should not be copied or submitted to any government agency. Always use your own information and consult the appropriate agency or professional for current requirements.

May 20, 2024

Orange County Clerk of Court
Records Department
425 N. Orange Avenue, Suite 210
Orlando, FL 32801

RE: Recording Affidavit of Continuous Marriage
Affiant: Margaret Louise Bennett
Deceased Spouse: Thomas Edward Bennett
Property Address: 7421 Magnolia Ridge Lane, Winter Garden, FL 34787

To Whom It May Concern:

Enclosed please find an original Affidavit of Continuous Marriage, executed by Margaret Louise Bennett, surviving spouse of Thomas Edward Bennett, for the purpose of establishing homestead property rights under Florida Statutes § 732.702.

Please record this document in the public records.

If you require any additional information or have questions regarding this submission, please contact me using the information below.

Sincerely,

Margaret L. Bennett

Margaret Louise Bennett
7421 Magnolia Ridge Lane
Winter Garden, FL 34787
(407) 555-2184
margaret.bennett@email.com

DOCUMENTS ENCLOSED

- [x] Original Affidavit of Continuous Marriage
- [ ] Copy of Deceased Spouse's Death Certificate
- [ ] Copy of My Florida Driver License
- [ ] Check for Recording Fee (if required)
- [ ] Self-Addressed Stamped Envelope (if requested)

PROPERTY INFORMATION

Property Address:	*7421 Magnolia Ridge Lane, Winter Garden, FL 34787*
Parcel Identification Number (Folio):	*24-22-27-1234-01-890*
County:	*Orange County, Florida*
Legal Description:	*Lot 18, Magnolia Ridge, Phase 2, according to the Plat thereof, as recorded in Plat Book 122, Pages 45-47, Public Records of Orange County, Florida.*

FOR CLERK'S OFFICE USE ONLY

Date Received: _____ Time Received: _____ Received By: _____

Recording Book: _____ Page: _____ Instrument Number: _____ Fee Paid: _____

Thank you for your assistance in recording this important document. Your service is appreciated.

FLORIDA DEPARTMENT OF REVENUE

AFFIDAVIT OF NO FLORIDA ESTATE TAX DUE

DR-312

I, **Helen Carter,** surviving spouse of the decedent **William "Bill" Carter**, do hereby declare the following:

1. The decedent, **William "Bill" Carter**, died on **May 7, 2025**, and was a resident of Lake County, Florida at the time of death.

2. The decedent's estate is not subject to the Florida estate tax because:
   - The estate value does not meet the threshold requiring a federal estate tax return (Form 706) to be filed with the Internal Revenue Service.
   - Therefore, no Florida estate tax is due.

3. This affidavit is made in compliance with Chapter 198 of the Florida Statutes for the purpose of obtaining a release of Florida estate tax lien on the property located at:

   1457 Magnolia Pointe Drive
   Leesburg, Florida 34748

   Legal Description:
   Lot 47, of MAGNOLIA POINTE, according to the plat thereof, as recorded in Plat Book 72, Pages 10 through 13, of the Public Records of Lake County, Florida.

4. I understand that this affidavit is given under oath and that any false statement contained herein may be punishable as provided by law.

Dated this **21st** day of **May**, 2025.

Helen Carter

Helen Carter

STATE OF FLORIDA)
COUNTY OF LAKE)

The foregoing instrument was acknowledged before me by means of

☑ physical presence ☐ online notarization, this **21st** day of **May**, 2025,

by **Helen Carter**, who is personally known to me or who has produced **Florida Driver's License** as identification.

NOTARY PUBLIC • STATE OF FLORIDA •

JENNIFER L. MORGAN
Notary Public, State of Florida
Commission # HH 327891
My Commission Expires
January 15, 2029

Notary Public, State of Florida

My Commission Expires: **January 15, 2029**

THIS AFFIDAVIT IS FOR RECORDING PURPOSES ONLY.
Retain a copy for your records.

CHAPTER 198
FLORIDA STATUTES

WILLIAM & HELEN CARTER

SAMPLE DOCUMENT PACKET

Helen Carter
458 Lakeview Drive
Leesburg, Florida 34748
Phone: (352) 555-1846
Email: helencarter@email.com

May 21, 2025

Clerk of the Circuit Court
Lake County Courthouse
Post Office Box 7800
550 West Main Street
Tavares, Florida 32778

RE: Removal of Deceased Spouse from Property Title

To Whom It May Concern,

Please find enclosed the necessary documentation to formally remove my deceased spouse, **William "Bill" Carter**, from the title of our jointly owned property located at:

1457 Magnolia Pointe Drive
Leesburg, Florida 34748

The documents included are:

1. A certified copy of the Death Certificate (please return after recording)
2. An Affidavit of Continuous Marriage
3. Florida Department of Revenue Form DR-312
   (Affidavit of No Florida Estate Tax Due)

Please record the Affidavit of Continuous Marriage in the official records of Lake County and return the original documents, including the death certificate, to my mailing address listed above.

If any additional information is required, please do not hesitate to contact me at the phone number listed above.

Sincerely,
Helen Carter
Helen Carter

RECORDING PACKET COVER SHEET

LAKE COUNTY CLERK OF COURT

FROM (RETURN TO):

Helen Carter
458 Lakeview Drive
Leesburg, Florida 34748
Phone: (352) 555-1846
Email: helencarter@email.com

DATE: May 21, 2025

PURPOSE OF RECORDING:

Remove deceased spouse from title to real property as surviving spouse.

PROPERTY INFORMATION

Property Address:	1457 Magnolia Pointe Drive, Leesburg, Florida 34748
Legal Description:	Lot 47, of MAGNOLIA POINTE, according to the plat thereof, as recorded in Plat Book 72, Pages 10 through 13, of the Public Records of Lake County, Florida.
Parcel Identification Number (if known):	12-19-24-0001-004-04700
Current Title Held By:	William "Bill" Carter and Helen Carter, husband and wife
Deceased:	William "Bill" Carter Date of Death: May 7, 2025
Surviving Spouse:	Helen Carter

DOCUMENTS INCLOSED

Please ensure all required documents are included and properly executed.

1	Certified Copy of Death Certificate	☑ Enclosed
2	Affidavit of Continuous Marriage	☑ Enclosed
3	Florida Department of Revenue Form DR-312 *(Affidavit of No Florida Estate Tax Due)*	☑ Enclosed
4	Recording Fee (Check or Money Order)	☐ Enclosed

PLEASE RETURN RECORDED DOCUMENTS TO:

Helen Carter
458 Lakeview Drive
Leesburg, Florida 34748

FOR CLERK USE ONLY

Date Received: _____ Document # _____

Recorded In: _____ Book _____ Page _____

Fee Paid: _____ By: _____

Clerk's Stamp Here

Thank you for your assistance.

CLEAR DOCUMENTS. SMOOTH PROCESS. PEACE OF MIND. ◆ FAITH. FAMILY. LEGACY.

CLERK RECORDING CHECKLIST

LAKE COUNTY CLERK OF COURT

Removal of Deceased Spouse from Property Title

PROPERTY OWNER:
Helen Carter
458 Lakeview Drive
Leesburg, Florida 34748

PROPERTY ADDRESS:
1457 Magnolia Pointe Drive
Leesburg, Florida 34748

DATE PREPARED:
May 21, 2025

Use this checklist to help ensure your recording packet is complete and all requirements are met before submitting to the Clerk of Court for recording.

1 BEFORE SUBMITTING YOUR PACKET	COMPLETE
☑ All documents are original (no copies unless required).	☑
☑ Affidavit of Continuous Marriage is signed and notarized.	☑
☑ DR-312 *(Affidavit of No Florida Estate Tax Due)* is signed and notarized.	☑
☑ Death Certificate (certified copy) is included.	☑
☑ Legal description on all documents matches exactly.	☑
☑ Recording fee (check or money order) is included.	☑
☑ Return address is clearly provided.	☑
☑ All pages are single-sided and 8.5" x 11".	☑

2 AT THE CLERK'S OFFICE	COMPLETE
☑ Provide packet to clerk or recording department.	☑
☑ Pay recording fee.	☑
☑ Ask for estimated time documents will be recorded.	☑
☑ Request return of original documents (including death certificate).	☑

3 AFTER RECORDING	COMPLETE
☑ Verify documents were recorded with correct book and page number.	☑
☑ Keep recorded copy for your records.	☑
☑ Store originals safely.	☑

IMPORTANT REMINDER:
Recording this affidavit will show public record that you are the sole owner of the property. This does not change your mortgage or insurance. Be sure to notify your lender and insurance company after recording.

"The Lord is close to the brokenhearted and saves those who are crushed in spirit."
PSALM 34:18

THANK YOU FOR LETTING US SERVE YOU.
CLEAR DOCUMENTS. SMOOTH PROCESS. PEACE OF MIND.

SAMPLE RECORDING RECEIPT

LAKE COUNTY CLERK OF COURT

This is a sample of the receipt you will receive after your documents have been recorded.

KEEP THIS FOR YOUR RECORDS

RECEIPT DATE: May 23, 2025

RECEIPT NUMBER: 2025-00018472

CLERK: Gary J. Cooney, *Clerk of Circuit Court*

CUSTOMER INFORMATION

Name: Helen Carter
Address: 458 Lakeview Drive, Leesburg, FL 34748
Phone: (352) 555-1846
Email: helencarter@email.com

PROPERTY INFORMATION

Property Address:
1457 Magnolia Pointe Drive
Leesburg, Florida 34748

Parcel ID (if known):
12-19-24-0001-004-04700

DOCUMENTS RECORDED

DOC #	DOCUMENT TYPE	BOOK	PAGE	PAGES	RECORDING FEES
1	Affidavit of Continuous Marriage	8376	1250	3	$10.00
2	Affidavit of No Florida Estate Tax Due (DR-312)	8376	1253	2	$10.00
3	Cover Letter (Not Recorded)	—	—	1	$0.00
4	Certified Copy of Death Certificate (Returned)	—	—	1	$0.00
5	Recording Packet Cover Sheet (Not Recorded)	—	—	1	$0.00

The above documents were recorded in the Official Records of Lake County, Florida.

FEES SUMMARY

Recording Fees (2 documents @ $10.00)	$20.00
Certification Fee	$0.00
Total Pages Recorded:	5
TOTAL PAID:	**$20.00**

RECORDED
MAY 23, 2025

Thank you for allowing us to be of service.
We are committed to providing accurate and timely service.

Gary J. Cooney

Gary J. Cooney
Clerk of the Circuit Court
Lake County, Florida

Lake County Courthouse
Post Office Box 7800
550 West Main Street
Tavares, Florida 32778
(352) 343-9600
www.lakecountyclerk.org

FAITH. FAMILY. INTEGRITY. SERVICE.

SAMPLE COMPLETED FORM

This is a fictional example provided for instructional purposes only. Do not submit this example to any government agency.

DR-312
R. 01/24

FLORIDA DEPARTMENT OF REVENUE

Application for Homestead Property Tax Exemption and Return of Ownership and Occupancy

Section 196.031(1), Florida Statutes

FOR OFFICE USE ONLY
Application ID: _____
Date Received: _____
Exemption Effective: _____

Instructions: Please print or type. *See back of form for complete instructions.*

1. TYPE OF RETURN (Check one)

- [x] Original Application
- [ ] Transfer of Homestead Exemption (same county)
- [ ] Transfer of Homestead Exemption (different county)
- [ ] Amendment to Existing Exemption
- [ ] Cancel Exemption

2. APPLICANT INFORMATION

Applicant's Name (Last, First, Middle)	Social Security Number
Margaret Louise Bennett	XXX-XX-4321

Date of Birth	Phone Number	Email Address
10/14/1962	(407) 555-2184	margaret.bennett@email.com

Mailing Address (if different from property address)	City, State, ZIP
PO Box 9821	Winter Garden, FL 34787

3. PROPERTY INFORMATION

Property Address (Physical Address)	City, State, ZIP
7421 Magnolia Ridge Lane	Winter Garden, FL 34787

County	Parcel Identification Number (Folio)	Property Use
Orange	24-22-27-1234-01-890	[x] Residence [ ] Commercial [ ] Other

4. APPLICANT'S QUALIFYING INFORMATION – Standards for exemption: You must own and permanently reside on the property as of January 1.

A. Do you own and permanently reside on the property as of January 1 of this year? [x] Yes [ ] No

B. Date you first owned and permanently resided on this property: March 3, 2002

C. Is this property your permanent residence? [x] Yes [ ] No

D. Have you claimed a homestead exemption on any other property in Florida? [ ] Yes [x] No

If Yes, provide the address of the other property: _____

5. SPOUSE INFORMATION (If applicable)

Spouse's Name (Last, First, Middle)	Social Security Number
Thomas Edward Bennett	XXX-XX-9876

Date of Birth	Date of Death (if applicable)	Was spouse a permanent resident on January 1?
06/03/1961	02/28/2023	[x] Yes [ ] No

6. CERTIFICATION

I declare that I have read the information on this form and that the facts stated in it are true. I understand that this exemption is subject to cancellation if I do not continue to qualify.

Margaret L. Bennett	Margaret Louise Bennett	May 20, 2024
Signature of Applicant	Print Name	Date

7. NOTARY CERTIFICATION

STATE OF FLORIDA
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me by means of [x] physical presence or [ ] online notarization,

this 20th day of May, 20 24, by Margaret Louise Bennett, who is personally known to me or who has produced Florida Driver License as identification.

NOTARY PUBLIC STATE OF FLORIDA

JENNIFER A. WILSON
Notary Public - State of Florida
Commission # HH 367892
My Commission Expires
August 15, 2027

Jennifer A. Wilson
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public: Jennifer A. Wilson

Commission 08/15/2027

IMPORTANT: This completed application must be filed with the **Property Appraiser** in the county where the property is located. Keep a copy for your records.