AND WHEN RECORDED MAIL TO

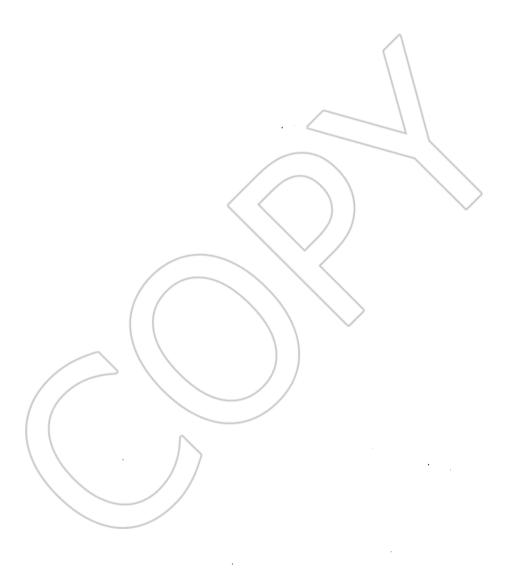
P-K CONSTRUCTION P.O. Box 2435 Gardnerville, NV 89410

__ SPACE ABOVE THIS LINE FOR RECORDER'S USE __

SUBSTITUTION OF TRUSTEE AND DEED OF FULL RECONVEYANCE

WHEREAS, P-K CO	NSTRUCTION, INC.	and the same of th	Δ	
LAWYER	S TITLE OF NORTHERN	NEVADA, INC.	was the origina	il Trustor,
			was the original Tru	ustee, and
	CKSON AND BONNIE JA		4007	
was the original Beneficiary under that certain deed of Trust dated APRIL 30, 1987				
and recorded on MAY 5, 19 Record of DOUGLAS	87	, III 000K		of Official
RCCOID OI	y nagara a spenigam pulabhagaire ann an ta de e e an e e e e e e e e e e e e e e e e	County, under De	ediffere 140.	,
				\
WHEREAS, the undersign	gned is the present Benefic	ciary under said Deed	of Trust, and	
	,			
WHEREAS, the undersi	gned desires to substitute	a new Trustee under	said Deed of Trust in the	place and
stead of said original Trustee th	ereunder, in the manner i	n said Deed of Trust	provided,	
THEREFORE Alexander	i	munucut vec		
HEREFORE, the under	signed hereby substitutes	THEMSELVES	/	
as trustee under said deed of trus	t	<u> </u>		
	THE UNDERSIGNED	\ (
NOW, THEREFORE, as substituted Trustee, do		warranty to the pers	on or persons legally entitle	ed thereto.
the estate held by the trustee, dec				
/ /				
	_	ruline gender includes	the feminine and/or neute	er, and the
singular number includes the pl	urai.	\ \	0 0	
Dated JULY 8,	, 19_87		// ()	
1 D D		12-6		
DOD JANKSON	Beneficiary	Jon Ja	tkson	Trustee
Bry Dacks		Bornes	Jackson	
Bonnt FACKSON	Beneficiary	Bonnie	sackson.	Trustee
FOR INDIVIDUAL ACKNO	OWLEDGMENT		VIDUAL ACKNOWLEDGMEN	T
STATE OF NEVADA	-ss.	STATE OF NEVADA COUNTY OF DOUG		ss.
COUNTY OF DOUGLAS On JULY 8, 1987	before me, the under-	On JULY 8, 19	07) me, the under-
signed, a Notary Public in and for sai	d State, personally appeared		e in and for said State, person N AND BONNIE JACKSO	ally appeared
DON JACKSON AND BONN	IE JACKSON	DON JACKSO	N AND BONNIE DACKSON	14
	, known to me		*	known to me
to be the person S whose name S	and the second s		whose name Ssubscribed	d to the within
instrument and acknowledged that TH	EY executed the same.		edged that THEY exect	uted the same.
WITNESS my hand and official seal.	/	WITNESS my hand and	l official seal.	-/
Signature A COM		Signatur	-	
C. ACEVES Name (Typed or I	Printed)	C. ACEV	ES (Typed or Printed)	#
	ethical			
MOTALY PUBLI			ACCURE	5 - 525 - 5
DOUGLAS (COUNTY		DOUGLAS COUNTY	· j
(Ny Appt. Expires	4.	A see to make the first of the	Appt. Expires August 14,15	ma)
			The second se	
			15	8022

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REGLESTED BY LAWYERS TITLE IN OFFICIAL RECORDS OF POLICIAL RECORDS OF

87 JUL 10 A9:45

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