

WHEN RECORDED MAIL TO:
MR. AND MRS. GUSSE
1554 SE 175TH CT.
RENTON, WA. 98058

Escrow No. S60251LB

**SUBSTITUTION OF TRUSTEE
AND DEED OF FULL RECONVEYANCE**

WHEREAS, STEWART TITLE OF DOUGLAS COUNTY

named as Trustee under that certain Deed of Trust executed by ROBERT C. GUSSE AND NANCY K. GUSSE

Trutor(s), dated July 24, 1989, recorded on August 7, 1989, in Book 889, Page 902, as Document No. 208176, of Official Records of DOUGLAS County, Nevada; and,

WHEREAS, the undersigned is presently the Beneficiary thereunder and desires to appoint a new Trustee;

NOW THEREFORE, the undersigned Beneficiary does hereby appoint themselves as Trustee, in place and stead of STEWART TITLE OF DOUGLAS COUNTY

WHEREAS, the indebtedness secured to be paid by said Deed of Trust has been fully paid.

NOW THEREFORE, the undersigned as Substituted Trustee, does hereby reconvey to the person or persons legally entitled thereto, without warranty, all interest of the Trustee under said Deed of Trust, in the lands therein described.

DATED March 10, 1993

STATE OF NEVADA

County of

SIGNATURE OF BENEFICIARY/TRUSTEE

RONALD H. NOSE

GLENN Y. NOSE

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

No. 5193

State of California

County of Santa Clara

On 3/12/93 before me, Frances L. Maisel, Notary Public
DATE NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"

personally appeared Ronald H. Nose
Glenn Y. Nose
NAME(S) OF SIGNER(S)

personally known to me - OR - proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Frances L. Maisel
SIGNATURE OF NOTARY

**OPTIONAL SECTION
CAPACITY CLAIMED BY SIGNER**

Though statute does not require the Notary to fill in the data below, doing so may prove invaluable to persons relying on the document.

- INDIVIDUAL
- CORPORATE OFFICER(S)
- TITLE(S) _____
- PARTNER(S) LIMITED GENERAL
- ATTORNEY-IN-FACT
- TRUSTEE(S)
- GUARDIAN/CONSERVATOR
- OTHER: _____

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

OPTIONAL SECTION

THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT:

TITLE OR TYPE OF DOCUMENT _____

NUMBER OF PAGES _____ DATE OF DOCUMENT _____

SIGNER(S) OTHER THAN NAMED ABOVE _____

Though the data requested here is not required by law, it could prevent fraudulent reattachment of this form.

COPY

REQUESTED BY
WESTERN TITLE COMPANY, INC.
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'93 MAR 23 P12:06

SUZANNE BEAUDREAU
RECORDED
302590
PAID DEPUTY
BOOK 393 PAGE 4373