DATED January 14, 1994

SIGNATURE OF BENEFICIARY/TRUSTEE

SUBSTITUTION OF TRUSTEE AND DEED OF FULL RECONVEYANCE

WHEREAS, WESTERN TITLE COMPANY, INC., a Nevada Corporation

named as Trustee under that certain Deed of Trust executed by KEUPER KUSTOM HOMES, INC., a Nevada corporation

Trustor(s), dated September 9, 1993, recorded on September 29, 1993, in Book 993 , Page 6202 , as Document No. 318975 , of Official Records , County, Nevada; and,

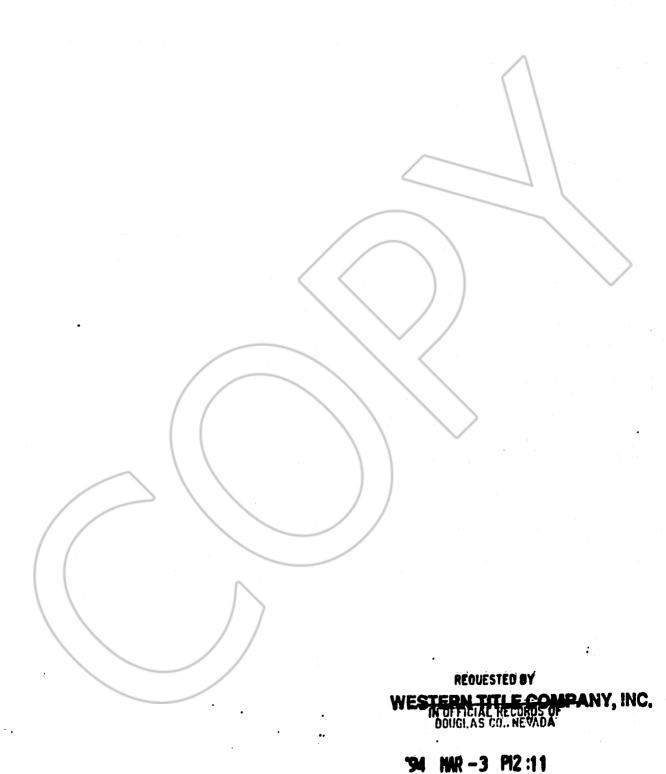
WHEREAS, the undersigned is presently the Beneficiary thereunder and desires to appoint a new Trustee;

NOW THEREFORE, the undersigned Beneficiary does hereby appoint themselves as Trustee, in place and instead of WESTERN TITLE COMPANY, INC., a Nevada Corporation

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.

County of DOUGLAS) SS. On before me, a notary public, personally appeared DOUGLAS) BY A. WRITA ON REST PENSION D REENT FOR MOST.	Custodian for the IT MILLINS IRA NO. 61-805701
State of SVANS On 2-17-94 before me, Shelly L. Hall (DATE) (NAME, TITLE OF OFFICER-J.E., "JANE DOE, NOTARY PUBLIC") personally appeared A. May I all Solding (NAME(S) OF SIGNER(S))	CAPACITY CLAIMED BY SIGNER(S) INDIVIDUAL(S) CORPORATE OFFICER(S) PARTNERS ATTORNEY IN FACT TRUSTEE(S) GUARDIAN/CONSERVATOR OTHER: Designate
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.	SIGNER IS REPRESENTING: (NAME OF PERSONIS) OR ENTITY(ES)) Monarch Bank Castodia, for the bonefil of the Vincent Mulling Tria NO 61-805701
THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT: Title or Type of Document Described At Right: Title or Type of Document Date of Document Date of Document Signer(s) Other Than Named Above Date of Document Signer(s) Other Than Named Above	



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SUZANNE BEAUDREAU

OP RECORDER

PAIU K 2 DEPUTY