

**UNIFORM COMMERCIAL CODE—FINANCING STATEMENT CHANGE—FORM N-UCC-2 STATE OF NEVADA**  
**IMPORTANT—** Read instructions on back before filling out form

This **STATEMENT** is presented for filing pursuant to the Nevada Uniform Commercial Code

#17

1. FILE NO OF ORIG FINANCING STATEMENT 281791		1A. DATE OF FILING OF ORIG FINANCING STATEMENT June 25, 1992		1B. DATE OF ORIG FINANCING STATEMENT June 5, 1992		1C. PLACE OF FILING ORIG FINANCING STATEMENT Douglas County	
2. DEBTOR (AS APPEARS ON ORIGINAL FINANCING STATEMENT) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Ford, Robert E.						2A. SOCIAL SECURITY OR FEDERAL TAX NO [REDACTED] 0285	
2B. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT) 1302 Langley, Langley Square #8				2C. CITY, STATE Gardnerville, Nevada		2D. ZIP CODE 89410	
3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Miller, Robert B.						3A. SOCIAL SECURITY OR FEDERAL TAX NO [REDACTED] 2012	
3B. MAILING ADDRESS 1302 Langley, Langley Square #8				3C. CITY, STATE Gardnerville, Nevada		3D. ZIP CODE 89410	
4. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Wagner, Michele M.						4A. SOCIAL SECURITY OR FEDERAL TAX NO [REDACTED] 6423	
4B. MAILING ADDRESS 1302 Langley, Langley Square #8				4C. CITY, STATE Gardnerville, Nevada		4D. ZIP CODE 89410	
5. SECURED PARTY NAME Valley Bank of Nevada MAILING ADDRESS P.O. Box 611 CITY Carson City STATE Nevada ZIP CODE 89702						5A. SOCIAL SECURITY NO, FED TAX NO OR BANK TRANSIT AND ABA NO 94-72/1224	
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE						6A. SOCIAL SECURITY NO, FED TAX NO OR BANK TRANSIT AND ABA NO	
7. <input type="checkbox"/> CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, fixtures, or oil, gas or minerals check here <input type="checkbox"/> and insert description of real property on which growing or to be grown or to which affixed or to be affixed or from which to be extracted in Item 8 below. If crops or fixtures, also insert name of record owner of real estate. Effective only if submitted within 6 months prior to expiration date.							
<input type="checkbox"/> RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 8 below. Release does not terminate debt.							
<input type="checkbox"/> ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all or part of the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 8 below.							
<input checked="" type="checkbox"/> TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.							
<input type="checkbox"/> AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 8 below. (Signature of Debtor(s) and Secured Party(ies) required on all amendments)							
8.							

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) August 9 19 94

By: \_\_\_\_\_ (SIGNATURE(S) OF DEBTOR(S)) (TITLE)

Valley Bank of Nevada now by merger Bank of America Nevada

By: [Signature] (SIGNATURE(S) OF SECURED PARTY(IES)) (TITLE)  
Donna Mahan (TYPE NAME(S))  
Assistant Vice President  
Senior Group Ops. Manager

10. This Space for Use of Filing Officer (Date, Time, Filing Office)

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

94 AUG 29 12:02

SUZANNE BEAUDREAU  
 RECORDER  
 \$17.00 PAID [Signature] DEPUTY

11. **Return Copy to**

NAME Robert E. Ford, Robert B. Miller  
 ADDRESS and Michele M. Wagner  
 CITY, STATE P.O. Box 2320  
 AND ZIP Minden, Nevada 89423

**344960**

**BK0894PG5010**