

WHEN RECORDED MAIL TO:
AMOS & SONDR A WILHELM, TRUSTEES
P O BOX 10499
ZEPHYR COVE NV 89448

Escrow No.: val
Reference: IC # 1782

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

WHEREAS, STEWART TITLE OF DOUGLAS COUNTY, a Nevada corporation
named as Trustee under that certain Deed of Trust executed by AMOS HOWARD
WILHELM AND SONDR A KAYE WILHELM AS TRUSTEES OF THE AMOS HOWARD WILHELM
AND SONDR A KAYE WILHELM REVOCABLE LIVING TRUST AGREEMENT DATED DEC. 21, 1990
Trustor(s), dated November 13, 1995 , recorded on November 20, 1995 , in
Book 1195 , Page 3223 , as Document No. 375198 , 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 instead of STEWART TITLE OF DOUGLAS
COUNTY, 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.

PROPERTY ADDRESS:
APN 5-212-53

DATED 3-17-97

SIGNATURE OF BENEFICIARY/TRUSTEE

JAMES A. DYE

VIRGINIA DYE

STATE OF)
County of)
)SS.
)

This instrument was acknowledged
before me on
by

Se. Alhade
Notary Public

FOR RECORDER'S USE

STATE OF California
COUNTY OF Orange } SS.

On March 17, 1997, before me, Mike Soss, Notary Public

PERSONALLY APPEARED James A. Dye, Virginia Dye

~~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.

Signature [Handwritten Signature]



OPTIONAL

Though the data below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent reattachment of this form.

CAPACITY CLAIMED BY SIGNER

- INDIVIDUAL
- CORPORATE OFFICER

TITLE(S)

- PARTNER(S)
- LIMITED
- GENERAL

- ATTORNEY-IN-FACT
- TRUSTEE(S)
- GUARDIAN/CONSERVATOR
- OTHER: _____

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

DESCRIPTION OF ATTACHED DOCUMENT

TITLE OR TYPE OF DOCUMENT

NUMBER OF PAGES

DATE OF DOCUMENT

SIGNER(S) OTHER THAN NAMED ABOVE

ALL-PURPOSE ACKNOWLEDGEMENT

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

'97 MAR 20 AM 11:57

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BK0397PG3120

LINDA SLATER
RECORDER
\$11.00 PAID ka DEPUTY