

**AFFIDAVIT - DEATH OF JOINT TENANT**

STATE OF NEVADA }  
                              } ss.  
COUNTY OF Douglas }

Francisco Feliciano, of legal age, being first duly sworn, deposes and says:  
That Lucie F. Feliciano, the decedent mentioned in the attached certified copy  
of Certificate of Death, is the same person as Lucie F. Feliciano  
named as one of the parties in that certain Grant Deed dated June 19, 1993  
executed by HARICH TAHOE DEVELOPMENTS, a Nevada general partnership  
to FRANCISCO FELICIANO and LUCIE F. FELICIANO, husband and wife  
as joint tenants, recorded as Instrument No. 311129, on June 29, 1993  
in Book 693, Page 6514, of Official Records of Douglas  
County, Nevada, covering the following described property situated in the Douglas  
County, State of Nevada:

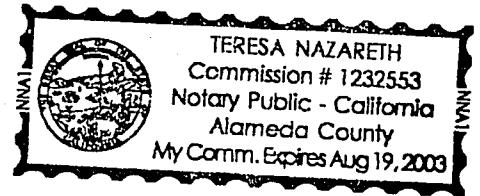
The Ridge Tahoe, Plaza Building, Prime Season, Week #37-054-28-02,  
Stateline, NV 89449

See Exhibit 'A' attached hereto and by this reference made a  
part hereof.

DATE: September 01, 1999

  
Francisco Feliciano

STATE OF California }  
                              } ss.  
COUNTY OF Alameda }



This instrument was acknowledged before me on 9-13-99  
Francisco Feliciano

(This area above for official notarial seal)

Signature Teresa Nazareth  
Notary Public

RECORDING REQUESTED BY:  
**STEWART TITLE COMPANY**  
WHEN RECORDED MAIL TO:

Francisco Feliciano  
684 Barbara Ct.  
San Leandro, CA 94577

0477127  
BK0999PG4089

**STATE OF CALIFORNIA  
CERTIFICATION OF VITAL RECORD**

**COUNTY of SANTA CLARA**

PUBLIC HEALTH  
2220 MOORPARK AVENUE., SAN JOSE, CALIFORNIA 95128

**CERTIFICATE OF DEATH**

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY/NO ERASURES, WHITEOUTS OR ALTERATIONS VS-11 (REV. 7/87)				LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (GIVEN) <b>Lucie</b>		2. MIDDLE <b>Franziska</b>		3. LAST (FAMILY) <b>Feliciano</b>			
4. DATE OF BIRTH M/M/D/D/C/CYY <b>08/24/1938</b>		5. AGE YRS. <b>60</b>		6. SEX <b>Female</b>		7. DATE OF DEATH M/M/D/D/C/CYY <b>08/27/1998</b>	
8. STATE OF BIRTH <b>GERMANY</b>		10. SOCIAL SECURITY NO. <b>1859</b>		11. MILITARY SERVICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		12. MARITAL STATUS <b>MARRIED</b>	
14. RACE <b>WHITE</b>		15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. USUAL EMPLOYER <b>SELF EMPLOYED</b>			
17. OCCUPATION <b>HOMEMAKER</b>		18. KIND OF BUSINESS <b>OWN HOME</b>		19. YEARS IN OCCUPATION <b>52</b>			
20. RESIDENCE—(STREET AND NUMBER OR LOCATION) <b>684 BARBARA COURT</b>							
21. CITY <b>SAN LENADRO</b>		22. COUNTY <b>ALAMEDA</b>		23. ZIP CODE <b>94577</b>		25. STATE OR FOREIGN COUNTRY <b>CA</b>	
26. NAME, RELATIONSHIP <b>FRANCISCO FELICIANO—HUSBAND</b>				27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) <b>684 BARBARA COURT SAN LEANDRO, CA 94577</b>			
28. NAME OF SURVIVING SPOUSE—FIRST <b>FRANCISCO</b>		29. MIDDLE <b>-</b>		30. LAST (MAIDEN NAME) <b>FELICIANO</b>			
31. NAME OF FATHER—FIRST <b>RICHARD</b>		32. MIDDLE <b>-</b>		33. LAST <b>SECKER</b>		34. BIRTH STATE <b>GERMANY</b>	
35. NAME OF MOTHER—FIRST <b>HELENE</b>		36. MIDDLE <b>FRANZISKA</b>		37. LAST (MAIDEN) <b>HESS</b>		38. BIRTH STATE <b>GERMANY</b>	
39. DATE M/M/D/D/C/CYY <b>08/31/1998</b>		40. PLACE OF FINAL DISPOSITION <b>RES: Francisco Feliciano, 684 Barbara Court San Leandro, CA 94577</b>					
41. TYPE OF DISPOSITION(S) <b>CR/RES</b>		42. SIGNATURE OF EMBALMER <b>NOT EMBALMED</b>				43. LICENSE NO. <b>-</b>	
44. NAME OF FUNERAL DIRECTOR <b>CHAPEL OF THE CHIMES</b>		45. LICENSE NO. <b>FD1240</b>		46. SIGNATURE OF LOCAL REGISTRAR <i>Martin D Fenstersheib MD</i>		47. DATE M/M/D/D/C/CYY <b>08/31/1998</b>	
101. PLACE OF DEATH <b>VA Health Care System</b>		102. IF HOSPITAL, SPECIFY ONE: <input checked="" type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA		103. FACILITY OTHER THAN HOSPITAL: <input type="checkbox"/> CONV. HOSP. <input type="checkbox"/> RES. CARE <input type="checkbox"/> OTHER		104. COUNTY <b>Santa Clara</b>	
105. STREET ADDRESS—(STREET AND NUMBER OR LOCATION) <b>3801 Miranda Avenue</b>		106. CITY <b>Palo Alto</b>				107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)	
IMMEDIATE CAUSE <b>(A) Renal Failure</b>		DAYS <b>Days</b>		108. DEATH REPORTED TO CORONER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFERRAL NUMBER		109. BIOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
DUE TO <b>(B) Upper Gastrointestinal Bleed</b>		DAYS <b>Days</b>		110. AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		111. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input type="checkbox"/> NO	
DUE TO <b>(C) Varices</b>		DAYS <b>Days</b>		112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107 <b>None</b>		113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE. <b>No</b>	
DUE TO <b>(D) Alcohol Related Cirrhosis of Liver</b>		YEARS <b>Years</b>		114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. DECEDENT ATTENDED SINCE M/M/D/D/C/CYY <b>08/23/1998</b> DECEDENT LAST SEEN ALIVE M/M/D/D/C/CYY <b>08/27/1998</b>			
115. SIGNATURE AND TITLE OF CERTIFIER <i>Alan Garber</i>		116. LICENSE NO. <b>G057349</b>		117. DATE M/M/D/D/C/CYY <b>08/27/1998</b>		118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP <b>VA Health Care System</b>	
119. MANNER OF DEATH <input type="checkbox"/> NATURAL <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> PENDING INVESTIGATION <input type="checkbox"/> COULD NOT BE DETERMINED		120. INJURY AT WORK <input type="checkbox"/> YES <input type="checkbox"/> NO		121. INJURY DATE M/M/D/D/C/CYY		122. HOUR	
123. PLACE OF INJURY		124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)					
125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP)		126. SIGNATURE OF CORONER OR DEPUTY CORONER		127. DATE M/M/D/D/C/CYY		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER	

H1067762 CORONER'S USE ONLY

STATE OF CALIFORNIA	CERTIFIED COPY OF VITAL RECORDS	FAX AUTH. #	CENSUS TRACT
COUNTY OF SANTA CLARA	DATE ISSUED	<b>03704</b>	
By <i>Martin D. Fenstersheib MD</i>			

This is a true and exact reproduction of the document officially registered and placed on file in the VITAL RECORDS SECTION, DEPARTMENT OF PUBLIC HEALTH.

*Martin D. Fenstersheib MD*  
MARTIN D. FENSTERSHEIB  
HEALTH OFFICER AND LOCAL REGISTRAR  
OF BIRTHS AND DEATHS

**0477127 09/10/1998**

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

**BK0999PG4090**

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

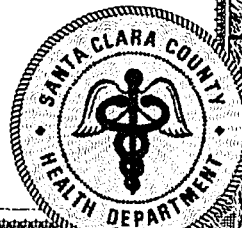


EXHIBIT "A" (37)

An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/106th interest in and to Lot 37 as shown on Tahoe Village Unit No. 3-13th Amended Map, recorded December 31, 1991, as Document No. 268097, rerecorded as Document No. 269053, Official Records of Douglas County, State of Nevada, excepting therefrom Units 039 through 080 (inclusive) and Units 141 through 204 (inclusive) as shown on that certain Condominium Plan Recorded July 14, 1988, as Document No. 182057; and (B) Unit No. 054 as shown and defined on said Condominium Plan; together with those easements appurtenant thereto and such easements described in the Fourth Amended and Restated Declaration of Time Share Covenants, Conditions and Restrictions for The Ridge Tahoe recorded February 14, 1984, as Document No. 096758, as amended, and in the Declaration of Annexation of The Ridge Tahoe Phase Five recorded August 18, 1988, as Document No. 184461, as amended, and as described in the Recitation of Easements Affecting the Ridge Tahoe recorded February 24, 1992, as Document No. 271619, and subject to said Declarations; with the exclusive right to use said interest in Lot 37 only, for one week each year in the Prime "Season" as defined in and in accordance with said Declarations.

A portion of APN: 42-282-08

REQUESTED BY  
**STEWART TITLE of DOUGLAS COUNTY**  
IN OFFICIAL RECORDS OF  
DOUGLAS COUNTY, NEVADA

1999 SEP 21 AM 10:45

LINDA SLATER  
RECORDER

\$ 9.00 PAID [Signature] DEPUTY

0477127

BK0999PG4091