

18.
RECORDING REQUESTED BY:
Provident Funding Associates, L.P.
1235 N. Dutton Avenue, Suite E
Santa Rosa, CA 95401

✓ WHEN RECORDED MAIL TO:
Mail Tax Statements To:
MARK LUNSTRUM
JANET P. LUNSTRUM
3174 HOBO HOT SPRINGS ROAD
MINDEN, NV 89423

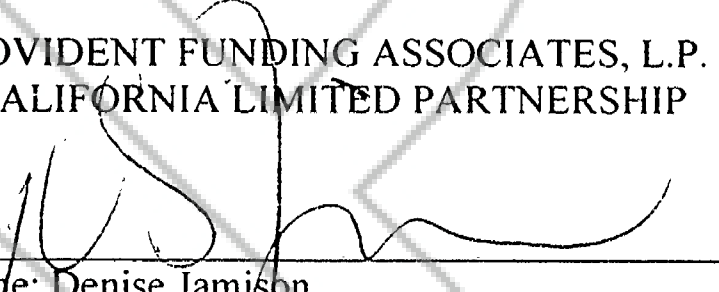
SUBSTITUTION OF TRUSTEE AND FULL RECONVEYANCE

Loan # 0208090282 Parcel# 13-200-27
Property: 3174 HOBO HOT SPRINGS ROAD , MINDEN, 89423

The undersigned, the present Beneficiary under that certain Deed of Trust executed by **MARK LUNSTRUM JANET P. LUNSTRUM HUSBAND AND WIFE**, Trustor, to **FIRST AMERICAN TITLE INSURANCE COMPANY, A CALIFORNIA CORPORATION**, as original Trustee, and recorded on 10/02/1998 as Instrument No. 0450939 in Book 1098, Page 0408-0417, of the Official Records of **DOUGLAS** county, NV, hereby substitutes **Provident Funding Associates, L.P., a California limited Partnership**, as the new and substituted Trustee thereunder in accordance with the terms and provisions contained therein, whose address is 1235 N. Dutton Avenue, Suite E., Santa Rosa, CA 95401, as such duly appointed and substituted Trustee thereunder, the undersigned hereby states that all sums secured by said Deed of Trust have been fully paid and satisfied and hereby reconveys to the person or persons legally entitled thereto, without warranty, all of the estate, title and interest acquired by the original Trustee and by the undersigned as the substituted Trustee under the Deed of Trust. The singular includes the plural wherever the text of this document so requires.

DATED: 02/10/2003

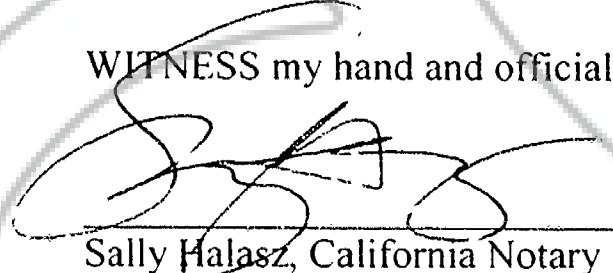
PROVIDENT FUNDING ASSOCIATES, L.P.
A CALIFORNIA LIMITED PARTNERSHIP

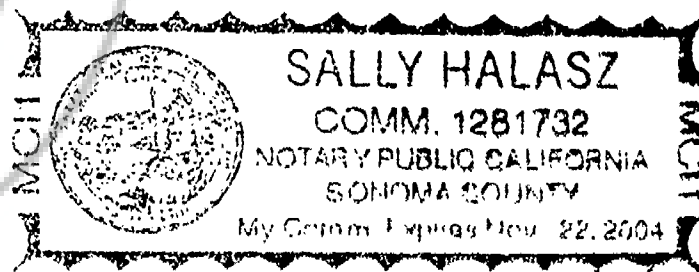
By: 
Name: Denise Jamison
Title: Assistant Vice President

STATE OF CALIFORNIA
COUNTY OF SONOMA

On February 10, 2003 before me Sally Halasz personally appeared Denise Jamison, 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 this instrument.

WITNESS my hand and official seal.


Sally Halasz, California Notary Public
My Commission Expires: 11/22/2004



Prepared by: Provident Funding Associates, L.P., 1235 N. Dutton Avenue, Suite E, Santa Rosa, CA 95401

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REQUESTED BY
Proident Funding
IN OFFICIAL RECORDS OF
DOUGLAS COUNTY, CANADA

2003 MAR 24 PM 2:53

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RECORDER

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