

40



REQUESTED BY
Z Loan + Invest
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2003 JUL -9 AM 9:51

WERNER CHRISTEN
RECORDER
\$4000 PAID K2 DEPUTY

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Z Loan & Investment, LLC
P.O. Box 12459
Zephyr Cove, NV 89448

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S LAST NAME: **Zavadil** FIRST NAME: **Larry** MIDDLE NAME: **A.** SUFFIX:

1c. MAILING ADDRESS: **P.O. Box 196** CITY: **Glenwood** STATE: **MN** POSTAL CODE: **56334** COUNTRY: **US**

1d. TAX ID #: **9342** ADD'L INFO RE ORGANIZATION DEBTOR: 1e. TYPE OF ORGANIZATION: 1f. JURISDICTION OF ORGANIZATION: 1g. ORGANIZATIONAL ID #, if any: NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S LAST NAME: FIRST NAME: MIDDLE NAME: SUFFIX:

2c. MAILING ADDRESS: CITY: STATE: POSTAL CODE: COUNTRY:

2d. TAX ID #: SSN OR EIN: ADD'L INFO RE ORGANIZATION DEBTOR: 2e. TYPE OF ORGANIZATION: 2f. JURISDICTION OF ORGANIZATION: 2g. ORGANIZATIONAL ID #, if any: NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME: **Richard and Carol Auslen Family Trust - Carol Auslen Share dated 9/23/91**

OR

3b. INDIVIDUAL'S LAST NAME: FIRST NAME: MIDDLE NAME: SUFFIX:

3c. MAILING ADDRESS: **P.O. Box 65** CITY: **Zephyr Cove** STATE: **NV** POSTAL CODE: **89448** COUNTRY: **US**

4. This FINANCING STATEMENT covers the following collateral:

Land Coverage appurtenant to property located at 442 Lakeview Avenue, Zephyr Cove, Nevada, 89448.

The land referred to herein is situated in the State of Nevada, County of Douglas, described as follows: See "Exhibit A".

Assessors Parcel Number: 1318-16-810-005

08769

5. ALTERNATIVE DESIGNATION (if applicable)	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (if applicable) (ADDITIONAL FEE) (optional)		All Debtors	Debtor 1	Debtor 2	

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S LAST NAME

Zavadil

FIRST NAME

Larry

MIDDLE NAME, SUFFIX

A

10. MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11d. TAX ID #: SSN OR EIN

ADD'L INFO RE ORGANIZATION DEBTOR

11e. TYPE OF ORGANIZATION

11f. JURISDICTION OF ORGANIZATION

11g. ORGANIZATIONAL ID #: if any

NONE

12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME

OR

12b. INDIVIDUAL'S LAST NAME

Barnett

FIRST NAME

David

MIDDLE NAME

E

SUFFIX

12c. MAILING ADDRESS

3170 HWY 50, Suite 5

CITY

South Lake Tahoe

STATE

CA

POSTAL CODE

96150

COUNTRY

US

13. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing.

14. Description of real estate:

Land Coverage appurtenant to property located at 442 Lakeview Avenue, Zephyr Cove, Nevada, 89448.

The land referred to herein is situated in the State of Nevada, County of Douglas, described as follows: See "Exhibit A".

Assessors Parcel Number: 1318-16-810-005

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

16. Additional collateral description:

17. Check only if applicable and check only one box.

Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY

Filed in connection with a Manufactured-Home Transaction — effective 30 years

Filed in connection with a Public-Finance Transaction — effective 30 years

0582714

UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

19. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

19a. ORGANIZATION'S NAME

OR

19b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

Zavadil

Larry

A.

20. MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

21. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (21a or 21b) - do not abbreviate or combine names

21a. ORGANIZATION'S NAME

OR

21b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

21c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

21d. **SEE INSTRUCTIONS**

ADD'L INFO RE ORGANIZATION DEBTOR

21e. TYPE OF ORGANIZATION

21f. JURISDICTION OF ORGANIZATION

21g. ORGANIZATIONAL ID #, if any

NONE

22. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (22a or 22b) - do not abbreviate or combine names

22a. ORGANIZATION'S NAME

OR

22b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

22c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

22d. **SEE INSTRUCTIONS**

ADD'L INFO RE ORGANIZATION DEBTOR

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22f. JURISDICTION OF ORGANIZATION

22g. ORGANIZATIONAL ID #, if any

NONE

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23a. ORGANIZATION'S NAME

OR

23b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

23c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

23d. **SEE INSTRUCTIONS**

ADD'L INFO RE ORGANIZATION DEBTOR

23e. TYPE OF ORGANIZATION

23f. JURISDICTION OF ORGANIZATION

23g. ORGANIZATIONAL ID #, if any

NONE

24. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) - insert only one name (24a or 24b)

24a. ORGANIZATION'S NAME

OR

24b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

24c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

1869 Rolling Brook Court

Reno

NV

89509

US

25. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) - insert only one name (25a or 25b)

25a. ORGANIZATION'S NAME

OR

25b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

25c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

P.O. Box 209

Glenbrook

0582714

NV

89413

US

UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

19. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

19a. ORGANIZATION'S NAME

OR

19b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

Zavadil

Larry

A.

20. MISCELLANEOUS:

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21. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (21a or 21b) - do not abbreviate or combine names

21a. ORGANIZATION'S NAME

OR

21b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

21c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

21d. **SEE INSTRUCTIONS**

ADD'L INFO RE ORGANIZATION DEBTOR

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21f. JURISDICTION OF ORGANIZATION

21g. ORGANIZATIONAL ID #, if any

NONE

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22a. ORGANIZATION'S NAME

OR

22b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

22c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

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23a. ORGANIZATION'S NAME

OR

23b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

23c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

23d. **SEE INSTRUCTIONS**

ADD'L INFO RE ORGANIZATION DEBTOR

23e. TYPE OF ORGANIZATION

23f. JURISDICTION OF ORGANIZATION

23g. ORGANIZATIONAL ID #, if any

NONE

24. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) - insert only one name (24a or 24b)

24a. ORGANIZATION'S NAME

OR

The Mallard Company

24b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

24c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

3490 Southampton Drive

Reno

NV

89509

US

25. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) - insert only one name (25a or 25b)

25a. ORGANIZATION'S NAME

OR

25b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

25c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

P.O. Box 315

Zephyr Cove 0582714

NV

89448

US

UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

19. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

19a. ORGANIZATION'S NAME

OR

19b. INDIVIDUAL'S LAST NAME Zavadil	FIRST NAME Larry	MIDDLE NAME, SUFFIX A.
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20. MISCELLANEOUS:

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21. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (21a or 21b) - do not abbreviate or combine names

21a. ORGANIZATION'S NAME

OR

21b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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21c. MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY
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21d. **SEE INSTRUCTIONS**

ADD'L INFO RE ORGANIZATION DEBTOR	21e. TYPE OF ORGANIZATION	21f. JURISDICTION OF ORGANIZATION	21g. ORGANIZATIONAL ID #, if any	<input type="checkbox"/> NONE
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22b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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22c. MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY
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OR

23b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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23c. MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY
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23d. **SEE INSTRUCTIONS**

ADD'L INFO RE ORGANIZATION DEBTOR	23e. TYPE OF ORGANIZATION	23f. JURISDICTION OF ORGANIZATION	23g. ORGANIZATIONAL ID #, if any	<input type="checkbox"/> NONE
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24. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) - insert only one name (24a or 24b)

24a. ORGANIZATION'S NAME

OR

Bruce E. Sarkin, MD, a Medical Corporation Pension Plan

24b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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24c. MAILING ADDRESS

CITY Grass Valley	STATE CA	POSTAL CODE 95945	COUNTRY US
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25. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) - insert only one name (25a or 25b)

25a. ORGANIZATION'S NAME

OR

25b. INDIVIDUAL'S LAST NAME John	FIRST NAME Schopf	MIDDLE NAME A.	SUFFIX Jr.
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25c. MAILING ADDRESS

CITY Zephyr Cove	STATE NV	POSTAL CODE 89448	COUNTRY US
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UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

19. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

19a. ORGANIZATION'S NAME

OR

19b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

Zavadil

Larry

A.

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FIRST NAME

MIDDLE NAME

SUFFIX

21c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

21d. **SEE INSTRUCTIONS**

ADD'L INFO RE ORGANIZATION DEBTOR

21e. TYPE OF ORGANIZATION

21f. JURISDICTION OF ORGANIZATION

21g. ORGANIZATIONAL ID #, if any

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MIDDLE NAME

SUFFIX

22c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

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22g. ORGANIZATIONAL ID #, if any

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FIRST NAME

MIDDLE NAME

SUFFIX

23c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

23d. **SEE INSTRUCTIONS**

ADD'L INFO RE ORGANIZATION DEBTOR

23e. TYPE OF ORGANIZATION

23f. JURISDICTION OF ORGANIZATION

23g. ORGANIZATIONAL ID #, if any

NONE

24. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) - insert only one name (24a or 24b)

24a. ORGANIZATION'S NAME

OR

Tall Pine, Ltd.

24b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

24c. MAILING ADDRESS

3490 Southampton Drive

CITY

Reno

STATE

NV

POSTAL CODE

89509

COUNTRY

US

25. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) - insert only one name (25a or 25b)

25a. ORGANIZATION'S NAME

OR

Z Loan & Investment, LLC

25b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

25c. MAILING ADDRESS

P.O. Box 12459

CITY

Zephyr Cove

0582714

STATE

NV

POSTAL CODE

89448

COUNTRY

US

EXHIBIT "A"

Lot 79, ELKS SUBDIVISION, as shown on the map recorded in the office of the County Recorder May 5, 1927 in the Book 1 of Maps, Douglas County Records and Amended Map recorded January 5, 1928, in Book 1 of Maps, Document No. 8537, Douglas County Records.

Excepting any portion of the above described property lying within the bed of Lake Tahoe below the line of natural ordinary high water and also excepting any artificial accretions to the land waterward of the line of natural ordinary high water or, if lake level has been artificially lowered, excepting any portion lying below an elevation of 6,223.00 feet, Lake Tahoe Datum established by NRS 321.595.

APN: 1318-16-810-005



0582714

BK 0703 PG 03294