

REQUESTED BY
FIRST AMERICAN TITLE CO.
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2003 SEP 22 PM 12: 18

WERNER CHRISTEN
RECORDER

\$150 PAID *Be* DEPUTY

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO

ARM FINANCIAL CORPORATION
P.O. BOX 85309
SAN DIEGO, CA 92186-5309

Space above this line for recorder's use only

Trustee Sale No. 03-02965 Loan No. 2710600621 Title Order No.
#

03-146176

SUBSTITUTION OF TRUSTEE

WHEREAS, KIMBER E. HONE AND NATALIE HONE, HUSBAND AND WIFE AS JOINT TENANTS WITH RIGHT OF SURVIVORSHIP, was the original Trustor, STEWART TITLE OF DOUGLAS COUNTY, A NEVADA CORPORATION, was the original Trustee, and RIDGE POINTE LIMITED PARTNERSHIP, A NEVADA LIMITED PARTNERSHIP, DBA SUNTERRA RESORTS, THE RIDGE POINTE, was the original Beneficiary under that certain Deed of Trust dated 02/06/2000, Recorded on 03/03/2000, Instrument 0487300, Book 0300, Page 0453 of official records in the office of the Recorder of DOUGLAS County, Nevada, and

WHEREAS, RIDGE POINTE LIMITED PARTNERSHIP, A NEVADA LIMITED PARTNERSHIP, DBA SUNTERRA RESORTS, the undersigned, is the present Beneficiary under said Deed of Trust, and,

WHEREAS, the undersigned desires to substitute a new Trustee under said Deed of Trust in the place of and stead of said original Trustee thereunder.

Now, THEREFORE, the undersigned Beneficiary hereby substitutes **ARM FINANCIAL CORPORATION**, P.O. BOX 85309, SAN DIEGO, CA 92186-5309, as Trustee of Said Deed of Trust.

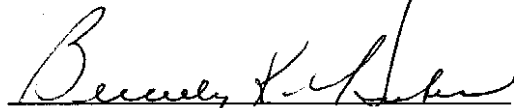
Whenever the context hereof so requires, the masculine gender includes the feminine and/or neuter, and the singular number indicates the plural.

0590763

BK0903PG11746

DATE: 9-18-3

RIDGE POINTE LIMITED PARTNERSHIP, A NEVADA LIMITED PARTNERSHIP, DBA SUNTERRA RESORTS

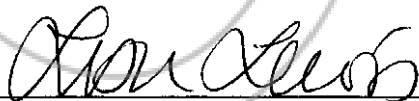


NAME: Beverly K Huber
TITLE: Recovery Officer

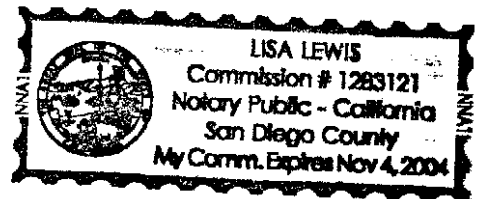
STATE OF: **CALIFORNIA**
COUNTY OF: **SAN DIEGO**

On 9-18-3 before me, Lisa Lewis, a Notary Public in and for said county, personally appeared Beverly K Huber, Recovery Officer, 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 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.



Notary Public in and for said County and State



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