

Douglas County - NV  
Werner Christen - Recorder  
Page: 1 Of 3 Fee: 16.00  
BK-0305 PG- 8182 RPTT: 0.00



RECORDING REQUESTED BY AND  
WHEN RECORDED MAIL TO:

✓ Legal Production Service  
1965 Yosemite Avenue, Suite 118  
Simi Valley, CA 93063

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ABOVE SPACE RESERVED FOR RECORDER

## AFFIDAVIT - DEATH OF TRUSTEE

APN: 42-261-06

VICKI LEE BARKAN, of legal age, being duly sworn, deposed and says that SHIRLEY BARKAN, the decedent mentioned in the attached Certificate of Death, is the same person as SHIRLEY BARKAN, named as a Trustee in that certain Trust Transfer Deed dated January 25, 1995, executed to SHIRLEY BARKAN and VICKI LEE BARKAN, TRUSTEES, recorded as Document No. 355669, of Official Records of Douglas County, Nevada, covering the following described real property in the County of Douglas, State of Nevada:

For complete legal description refer to EXHIBIT "A", attached hereto and made a part hereof.

Dated 2/18, 2005

Vicki Lee Barkan

State of California )  
                                  )SS.  
County of Ventura )

SUBSCRIBED AND SWORN TO before me this 18 day of February, 2005.

WITNESS MY HAND AND OFFICIAL SEAL

\_\_\_\_\_  
THERON MURPHY (Seal)

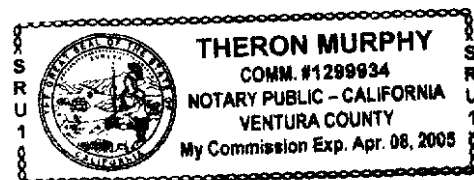


EXHIBIT "A"

An undivided 1/102nd interest as tenants in common in and to that certain real property and improvements as follows: (A) an undivided 1/38th interest in and to Lot 34 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 001 to 038 as shown on that certain Condominium Plan recorded June 22, 1987, as Document No. 156903; and (B) Unit No. 006 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 recorded February 21, 1984 as Document No. 097150 and as amended by Documents recorded October 15, 1990, June 22, 1987 and November 10, 1987 as Document Nos. 236691, 156904 and 166130, 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 the same unit type conveyed, in Lot 34 only, for one week every other year in Even-numbered years in the Prime "Season" as defined in and in accordance with said Declarations.

APN: 42-261-06



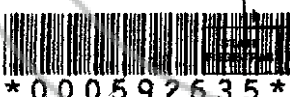
**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY OF VENTURA**  
VENTURA, CALIFORNIA

**CERTIFICATE OF DEATH**

3200456004076

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY / NO BRANCHES, WHITEOUTS OR ALTERATIONS VS-1 (REV. 10/04)		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given) <b>SHIRLEY</b>		2. MIDDLE -		3. LAST (Family) <b>BARKAN</b>	
4. AKA, ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)		4. DATE OF BIRTH mm/dd/yyyy <b>01/24/1920</b>		5. AGE Yrs. <b>84</b>	
8. BIRTH STATE/FOREIGN COUNTRY <b>ILLINOIS</b>		10. SOCIAL SECURITY NUMBER <b>0177</b>		11. EVER IN U.S. ARMED FORCES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
12. MARITAL STATUS (at Time of Death) <b>DIVORCED</b>		7. DATE OF DEATH mm/dd/yyyy <b>11/28/2004</b>		8. HOUR (24 Hour) <b>2023</b>	
13. EDUCATION - Highest Level/Degree (see worksheet on back) <b>HS GRADUATE</b>		14/15. WAS DECEDENT HISPANIC/LATINO(A)/SPANISH? (if yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) <b>WHITE</b>	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, food construction, employment agency, etc.) <b>REAL ESTATE</b>		19. YEARS IN OCCUPATION <b>30</b>	
20. DECEDENT'S RESIDENCE (Street and number or location) <b>2294 NORTH BIGELOW AVENUE</b>					
21. CITY <b>SIMI VALLEY</b>		22. COUNTY/PROVINCE <b>VENTURA</b>		23. ZIP CODE <b>93065</b>	
24. YEARS IN COUNTY <b>17</b>		25. STATE/FOREIGN COUNTRY <b>CALIFORNIA</b>			
26. INFORMANT'S NAME, RELATIONSHIP <b>BRUCE BARKAN - SON</b>			27. INFORMANT'S ADDRESS (Street and number, street name, city or town, state, ZIP) <b>1652 CALLE ZOCALO THOUSAND OAKS, CA 91360</b>		
28. NAME OF SURVIVING SPOUSE - FIRST		29. MIDDLE		30. LAST ( Maiden Name)	
31. NAME OF FATHER - FIRST <b>PETER</b>		32. MIDDLE		33. LAST <b>STEIN</b>	
34. BIRTH STATE <b>RUSSIA</b>		35. NAME OF MOTHER - FIRST <b>TILLIE</b>		36. MIDDLE	
37. LAST ( Maiden)		38. LAST <b>GUSS</b>		39. BIRTH STATE <b>RUSSIA</b>	
40. DISPOSITION DATE mm/dd/yyyy <b>12/01/2004</b>		41. PLACE OF FINAL DISPOSITION <b>MOUNT SINAI MEMORIAL PARK 5950 FOREST LAWN DR. LOS ANGELES, CA 90068</b>			
42. TYPE OF DISPOSITION(S) <b>BURIAL</b>		43. SIGNATURE OF EMBALMER <b>NOT EMBALMED</b>		44. LICENSE NUMBER	
45. NAME OF FUNERAL ESTABLISHMENT <b>MOUNT SINAI MORTUARY</b>		46. LICENSE NUMBER <b>FD-1010</b>		47. SIGNATURE OF LOCAL REGISTRAR <i>Robert Lee Stearns</i>	
48. DATE mm/dd/yyyy <b>11/30/2004</b>					
101. PLACE OF DEATH <b>RESIDENCE</b>		102. IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> IP <input type="checkbox"/> ENOP <input type="checkbox"/> DCA <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input checked="" type="checkbox"/> Dependents Home <input type="checkbox"/> Other		103. IF OTHER THAN HOSPITAL, SPECIFY ONE	
104. COUNTY <b>VENTURA</b>		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number or location) <b>2294 NORTH BIGELOW AVENUE</b>		106. CITY <b>SIMI VALLEY</b>	
107. CAUSE OF DEATH IMMEDIATE CAUSE (Final disease or condition resulting in death) <b>LUNG CANCER</b>		108. DEATH REPORTED TO CORONER? Time Interval (Days) <b>YEARS 2431-04</b>		109. YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
110. UNDERLYING CAUSE (disease or injury that initiated the sequence resulting in death) LAST		111. BIOPSY PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		112. AUTOPSY PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
113. USED IN DETERMINING CAUSE? <input type="checkbox"/> YES <input type="checkbox"/> NO		112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 <b>HYPERTENSION, CHRONIC OBSTRUCTIVE PULMONARY DISEASE</b>			
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date) <b>RIGHT UPPER LUNG RESECTION 07/17/1998</b>		113A. IF FEMALE, PREGNANT IN LAST YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK			
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent's Address (Given) Decedent's Last Seen Alive		115. SIGNATURE AND TITLE OF CERTIFIER <i>Joanne H. Mogannam M.D.</i>		116. LICENSE NUMBER <b>G53724</b>	
117. DATE mm/dd/yyyy <b>11/30/1998</b>		118. TYPE AT TENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE <b>JOANNE MOGANNAM M.D. 4950 SUNSET BL.L.A.CA. 90027</b>		117. DATE mm/dd/yyyy <b>11/29/2004</b>	
119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.		120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		121. INJURY DATE mm/dd/yyyy	
122. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		122. HOUR (24 Hour)			
124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)					
125. LOCATION OF INJURY (Street and number, or location, and city, and ZIP)					
126. SIGNATURE OF CORONER / DEPUTY CORONER		127. DATE mm/dd/yyyy		128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	



\*000592635\*

**CERTIFIED COPY OF VITAL RECORDS**

STATE OF CALIFORNIA }  
COUNTY OF VENTURA } SS

DATE ISSUED **12/03/2004**

This is a true and exact reproduction of the document officially registered and placed on file in the Vital Records Section, Ventura County Public Health Department, if it bears the date of issue in red ink.

*Robert Lee Stearns*  
HEALTH OFFICER  
VENTURA COUNTY, CALIFORNIA

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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

BK- 0305  
PG- 8184  
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