

WHEN RECORDED MAIL TO:
✓ GEORGE M. KEELE, ESQ.
1692 County Road, #A
Minden, NV 89423

Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 15 Fee: 28.00
BK-0406 PG- 2414 RPTT: 0.00



AFFIDAVIT OF THOMAS W. WILLHOITE, TRUSTEE OF
THE AMENDED THOMAS W. WILLHOITE AND BARBARA E. WILLHOITE
FAMILY 1990 TRUST

STATE OF NEVADA)
) ss.
COUNTY OF DOUGLAS)

I, THOMAS W. WILLHOITE, hereby swear (or affirm) under penalty of perjury, that the following assertions are true of my own personal knowledge:

1. I am the same Thomas W. Willhoite named with Barbara E. Willhoite on page 1 of The Amended Thomas E. Willhoite and Barbara E. Willhoite Family 1990 Trust as Trustee of The Amended Thomas E. Willhoite and Barbara E. Willhoite Family 1990 Trust, a copy of which page 1 is attached hereto as Exhibit A and incorporated herein by this reference.

2. Barbara E. Willhoite served with me as initial Trustee of The Amended Thomas E. Willhoite and Barbara E. Willhoite Family 1990 Trust, continuously, since November 27, 2001, which is the date of execution of The Amended Thomas E. Willhoite and Barbara E. Willhoite Family 1990 Trust by Thomas W. Willhoite and Barbara E. Willhoite, as Trustee, and by Thomas W. Willhoite and Barbara E. Willhoite, as Trustors.

3. On March 13, 2006, the above-named Barbara E. Willhoite died. A certified copy of her death certificate is attached hereto as Exhibit B and incorporated herein by this reference.

4. Attached hereto as Exhibit C and incorporated herein by this reference is a copy of pages 39, 40, and 41 of The Amended Thomas E. Willhoite and Barbara E. Willhoite Family 1990 Trust, which, in pertinent part, at Section 8.2 thereof, in the first sentence, reads as follows: "Upon the death, incapacity or resignation of either initial Trustee, the remaining co-trustee shall thereafter serve as a Trustee." Furthermore, in the second sentence of Section 8.3 of The Amended Thomas E. Willhoite and Barbara E. Willhoite Family 1990 Trust, the following statement controls the authority of Thomas W. Willhoite, as sole surviving Trustee of The Amended Thomas E. Willhoite and Barbara E. Willhoite Family 1990 Trust: "The surviving or remaining Trustee shall have all the powers and discretion in winding up the affairs of the trust as if that Trustee had been appointed as the sole Trustee of this trust."

5. Attached hereto as Exhibit D and incorporated herein by this reference are pages 44, 45, and 46 of The Amended Thomas E. Willhoite and Barbara E. Willhoite Family 1990 Trust, which pages show the execution of the said Amended Trust Declaration by Thomas E. Willhoite and Barbara E. Willhoite both as Trustors and as Trustee of the said Amended Declaration of Trust.

6. There have been no changes to The Amended Thomas E. Willhoite and Barbara E. Willhoite Family 1990 Trust since the date of its execution on or about November 27, 2001, in the presence of Noel Manoukian and Louise Manoukian, whose signatures were notarized by Natalie Stering-Mikalyuns, notary public, whose notary



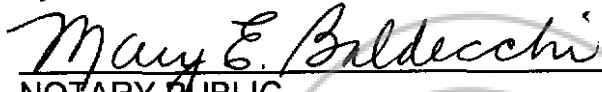
commission was due to expire December 12, 2004, when she notarized the signatures of Noel E. Manoukian and Louise M. Manoukian on The Amended Thomas E. Willhoite and Barbara E. Willhoite Family 1990 Trust on November 27, 2001.

7. Therefore, Thomas W. Willhoite continues at this moment to serve as sole surviving Trustee of The Amended Thomas E. Willhoite and Barbara E. Willhoite Family 1990 Trust.

DATED: APRIL 5, 2006


THOMAS W. WILLHOITE

SIGNED AND SWORN TO (or affirmed)
before me on April 5, 2006,
by THOMAS W. WILLHOITE.


NOTARY PUBLIC

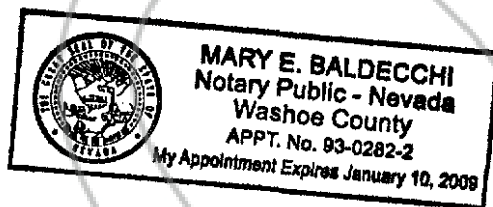


EXHIBIT A
COPY OF PAGE 1 OF THE AMENDED THOMAS E. WILLHOITE AND
BARBARA E. WILLHOITE FAMILY 1990 TRUST

COPY

**THE AMENDED
THOMAS W. WILLHOITE AND BARBARA E. WILLHOITE
FAMILY 1990 TRUST**

ARTICLE ONE - INTRODUCTION

1.1 Declaration.

This Amended Trust Declaration is made by THOMAS W. WILLHOITE and BARBARA E. WILLHOITE, husband and wife, of Douglas County, Nevada, herein called the "Trustors". In this Declaration, THOMAS W. WILLHOITE and BARBARA E. WILLHOITE, when referred to in their fiduciary capacities, and each successor Trustee, are referred to as "Trustee".

1.2 Beneficiaries.

The following persons are the beneficiaries of this Trust:

| <u>NAME</u> | <u>IDENTITY</u> |
|-----------------------------------|--|
| THOMAS W. WILLHOITE | Trustor/Beneficiary |
| BARBARA E. WILLHOITE | Trustor/Beneficiary |
| KIMBERLY ANN WILLHOITE | Trustor, THOMAS' Daughter/ Residuary Beneficiary |
| NORTHERN NEVADA HUMANE SOCIETY | Trustor, THOMAS' Contingent Beneficiary |
| STEVEN WEST | Trustor, BARBARA'S Nephew/ Contingent Beneficiary |
| DONALD WEST | Trustor, BARBARA'S Nephew/ Contingent Beneficiary |
| KATHRYN CAMP | Trustor, BARBARA'S Niece/ Contingent Beneficiary |

EXHIBIT B
CERTIFIED COPY OF DEATH CERTIFICATE
OF BARBARA E. WILLHOITE

COPY



STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH
VITAL STATISTICS

STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH — SECTION OF VITAL STATISTICS
CERTIFICATE OF DEATH

TYPE OR PRINT IN PERMANENT BLACK INK

PRECEDENT

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF EVIDENCE ITEMS

PARENTS

POSITION

CERTIFIER

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE

USE OF DEATH

| | | | |
|--|--|---|--|
| LOCAL FILE NUMBER | | STATE FILE NUMBER | |
| 1. DECEASED—NAME First Middle Last Barbara Emile WILLHOITE | | DATE OF DEATH (Month, Day, Year) March 13, 2006 | |
| CITY, TOWN OR LOCATION OF DEATH Carson City | | COUNTY OF DEATH Carson City | |
| 3b. Carson City | | 3c. Carson Tahoe Regional Medical Center | |
| RACE—(e.g., White, Black, American Indian, etc.) (Specify) White | | SEX Female | |
| 6. Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc. | | 7. AGE—Last Birthday (Years) 68 | |
| 8. DATE OF BIRTH (Mo., Day, Yr.) March 21, 1937 | | 9. UNDER 1 YEAR MOS : DAYS | |
| 10. UNDER 1 DAY HOURS : MINS | | 11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED Married | |
| 12. SURVIVING SPOUSE (If wife, give maiden name) Tomas W. Willhoite | | 13. SOCIAL SECURITY NUMBER 4621 | |
| 14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) Homemaker | | 14b. KIND OF BUSINESS OR INDUSTRY Own Home | |
| 15a. RESIDENCE—STATE Nevada | | 15b. COUNTY Douglas | |
| 15c. CITY, TOWN, OR LOCATION Minden | | 15d. STREET AND NUMBER 1045 Pinion Pine | |
| 15e. INSIDE CITY LIMITS (Specify Yes or No) Yes | | 16. FATHER—NAME First Middle Last Floyd West | |
| 17. MOTHER—MAIDEN NAME First Middle Last Ermal Kirkpatrick | | 18a. INFORMANT—NAME (Type or Print) Tom Willhoite | |
| 18b. MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) 1045 Pinion Pine Drive, Minden, Nevada 89423 | | 19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation | |
| 19b. CEMETERY OR CREMATORY—NAME Walton's Sierra Crematory | | 19c. LOCATION—City or Town State Carson City Nevada | |
| 20a. FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such) <i>[Signature]</i> | | 20b. FUNERAL DIRECTOR LICENSE NUMBER 09 | |
| 20c. NAME AND ADDRESS OF FACILITY Walton's Douglas County Mortuary | | 20d. ADDRESS 1478 4th St., Minden, Nevada 89423 | |
| 21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. <i>[Signature]</i> DATE SIGNED (Mo., Day, Yr.) 03/14/06 | | 21c. HOUR OF DEATH 18:54 | |
| 21b. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) Andrea Weed, D.O. | | 22a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner stated. <i>[Signature]</i> DATE SIGNED (Mo., Day, Yr.) | |
| 22b. PRONOUNCED DEAD (Mo., Day, Yr.) | | 22c. PRONOUNCED DEAD (Hour) | |
| 22d. PM | | 22e. AT | |
| 23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print) Andrea Weed, D.O., 1007 N. Gurry, Carson City, Nevada 89703 | | 23b. LICENSE NUMBER D0675 | |
| 24a. REGISTRAR (Signature) <i>[Signature]</i> | | 24b. DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) March 15, 2006 | |
| 24c. DEATH DUE TO COMMUNICABLE DISEASE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | 25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c)) | |
| PART I (a) Sepsis Syndrome | | Interval between onset and death weeks | |
| (b) B-cell lymphoma | | Interval between onset and death weeks | |
| (c) OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I. | | Interval between onset and death | |
| PART II 26. AUTOPSY (Specify Yes or No) NO | | 27. WAS CASE REFERRED TO CORONER (Specify Yes or No) NO | |
| 28a. ACC. SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify) 28a. | | 28b. DATE OF INJURY (Mo., Day, Yr.) | |
| 28c. HOUR OF INJURY M 28d. | | 28d. DESCRIBE HOW INJURY OCCURRED | |
| 28e. INJURY AT WORK (Specify Yes or No) | | 28f. PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify) | |
| 28g. LOCATION | | 28h. STREET OR R.F.D. No. | |
| 28i. CITY OR TOWN | | 28j. STATE | |

STATE REGISTRAR

No. 336116

107673

CERTIFIED COPY OF VITAL RECORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

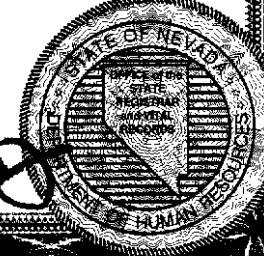
DATE ISSUED:

MAR 15 2006

[Signature]
STATE REGISTRAR

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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



BK- 0406
PG- 2420
Page: 7 of 15 04/07/2006
0672255

EXHIBIT C
PAGES 39, 40, 41 OF THE AMENDED THOMAS E. WILLHOITE AND
BARBARA E. WILLHOITE FAMILY 1990 TRUST

COPY



the faithful performance of the duties of such person as Trustee.

ARTICLE EIGHT - APPOINTMENT OF TRUSTEES

8.1 Initial Appointment.

So long as both Trustors shall live and shall be competent to manage their affairs, they shall jointly act as Trustee under this instrument.

8.2 Successors.

Upon the death, incapacity or resignation of either initial Trustee, the remaining co-trustee shall thereafter serve as a Trustee. In the event that both initial Trustees should die or fail or cease to act as Trustee, or one is unable or not desirous of serving, then we designate our First Alternate Trustee, namely, WELLS FARGO BANK TRUST DEPARTMENT, to serve, including by way of assisting a primary Trustee, should the primary Trustee request or need assistance. Should all of the foregoing referenced trustees fail to survive or be unable to serve, then we designate DONALD WEST, to serve as the successor, Second Alternate Trustee. Should none of the foregoing Trustees survive or be in existence, then we hereby designate KIMBERLY ANN WILLHOITE, to serve as our Third Alternate Trustee.

All references in this Trust Agreement to the term "Independent Trustee" shall be deemed to refer to the Trustee or successor Trustee other than THOMAS W. WILLHOITE and BARBARA E. WILLHOITE. In addition, the term "Independent Trustee" shall not be deemed to refer to any of the Settlor's grandchildren with respect to any Trust or portion of a Trust which may be created herein, for his or her benefit or, of

applicable, to any of Settlor's employees.

8.3 Vacancy at Termination Need Not Be Filled.

No vacancy in the trusteeship existing at the time of the termination of the trust, or occurring thereafter, need be filled. The surviving or remaining Trustee shall have all the powers and discretion in winding up the affairs of the trust as if that Trustee had been appointed as the sole Trustee of this trust.

8.4 Procedure for Succession.

Any person, bank or trust company entitled to become a successor Trustee under the provisions of this Article shall become such a Trustee by signing the original of this instrument and all then effective amendments to this instrument. After a successor becomes Trustee, the Trustee who is being succeeded (or, if the Trustee being succeeded is an individual who is deceased or incompetent, his or her personal representative, conservator, or guardian, as the case may be) shall promptly transfer and deliver to the successor Trustee all trust property then in his, her or its possession or control.

8.5 Successor's Powers and Duties.

Any individual or corporation becoming a successor Trustee as provided in this instrument, upon becoming successor Trustee immediately shall have and may exercise all or any of the powers and discretion which that individual or corporation would have had if it had been appointed an initial Trustee. The individual or corporation shall succeed to all title of the Trustee to trust properties and to all of the rights and duties of an initial Trustee under this instrument.

8.6 Right of Resignation.

Any Trustee of this trust may resign at any time by giving written notice as provided in the following paragraph, without stating or giving any reason for his, her or its resignation. A resignation shall be effective upon acceptance of the trust by the successor Trustee, which acceptance shall be in accordance with the procedure provided in the paragraph above entitled "Procedure for Succession". A determination that an individual Trustee is incompetent, as that term is defined in *Article Nine* of this instrument, shall be deemed a resignation by the individual Trustee as of the date of that determination.

8.7 Compensation of Individual Trustees.

Unless otherwise limited in this instrument, annually, each individual Trustee shall be entitled to reasonable compensation for fiduciary services rendered under this instrument.

8.8 Allocation.

All Trustee's compensation shall be charged against principal of the trust unless it is determined by the Trustee that it is in the best interests of the trust and of the persons interested in the trust that the compensation or some part of it be charged against income of the trust.

**ARTICLE NINE - APPLICABLE LAW, INTERPRETATION AND
CONSTRUCTION**

EXHIBIT D
PAGES 44, 45, 46 OF THE AMENDED THOMAS E. WILLHOITE AND
BARBARA E. WILLHOITE FAMILY 1990 TRUST

COPY

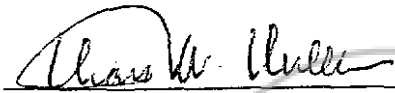


ARTICLE TEN - CONCLUDING PROVISIONS

10.1 Execution.

We, and each of us, certify that we have read the foregoing Amended Trust Declaration and that it correctly states the terms and conditions under which the trust estate is to be held, managed and disposed of by the Trustee. We approve of the Amended Trust Declaration in all particulars, and as the Trustee named in the Amended Trust Declaration, accept the trusts provided for in the Amended Declaration.

Executed on this 27 day of November, 2001 at Gardnerville, Douglas County, Nevada.



THOMAS W. WILLHOITE



BARBARA E. WILLHOITE

We certify that we have read the foregoing Amended Declaration of Trust and that it correctly states the terms and conditions under which the trust estate is to be held, managed and disposed of by the Trustees. We approve the Amended Declaration of Trust in all particulars and request the Trustees to execute it.



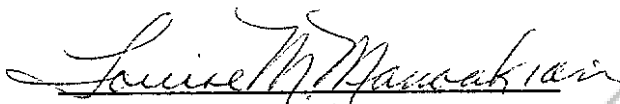
THOMAS W. WILLHOITE, TRUSTEE



BARBARA E. WILLHOITE, TRUSTEE

The foregoing instrument was on the 27th day of November, 2001, subscribed by the Trustors, THOMAS W. WILLHOITE and BARBARA E. WILLHOITE, in our pres-

ence and in the presence of each other, and was at the time thereof declared by them to be their Amended Trust, and we at that time, in their presence, at their request and in the presence of each other, hereunto subscribed our names as attesting witnesses. We hereby certify that at the time of the execution of said Amended Trust, THOMAS W. WILLHOITE and BARBARA E. WILLHOITE, the Trustors, were of sound and disposing mind, memory and understanding.



Louise M. Manoukian
1466 Highway 395 North
Gardnerville, Nevada 89410
SS# [REDACTED] 1172



Noel E. Manoukian
1466 Highway 395 North
Gardnerville, Nevada 89410
SS# [REDACTED] 9449

STATE OF NEVADA)
) ss:
COUNTY OF DOUGLAS)

Then and there personally appeared the within named Louise M. Manoukian and Noel E. Manoukian, who, being duly sworn, depose and say:

That they witnessed the execution of the within Amended Trust of the within named Trustors, THOMAS W. WILLHOITE and BARBARA E. WILLHOITE; that said Trustors subscribed said Amended Trust and declared the same to be their First Amended Trust in their presence; that they thereafter subscribed the same as witnesses in the presence of said Trustors and in the presence of each other and at the request of said Trustors; that said Trustors, at the time of the execution of said Amended Trust, appeared to them to be of full age and of sound mind, memory and that they make this Affidavit at

the request of said Trustors.

Louise M. Manoukian

Louise M. Manoukian
1466 Highway 395 North
Gardnerville, Nevada 89410
SS# [REDACTED] 1172

Noel E. Manoukian

Noel E. Manoukian
1466 Highway 395 North
Minden, Nevada 89423
SS# [REDACTED] 9449

SUBSCRIBED AND SWORN to before me this

27th day of November, 2001.

Natalie Stering-Mikalyuns
NOTARY PUBLIC

