

OFFICIAL RECORD

Requested By:
FIRST CENTENNIAL TITLE CO OF
NV

Douglas County - NV
Werner Christen - Recorder

Page: 1 Of 2 Fee: 15.00
BK-0706 PG-10769 RPTT: 0.00



APN: 1220-15-310-059

RECORDING REQUESTED BY:
Lawyers Title Insurance Corporation

WHEN RECORDED MAIL TO:

Name S. Vignale
Lawyers Title Insurance Corporation
Address 55 South Lake Ave. #600
City,State Pasadena, California 91101

Order No. C101745

(SPACE ABOVE THIS LINE FOR RECORDERS USE)

RESCISSION OF NOTICE OF DEFAULT

NOTICE IS HEREBY GIVEN:

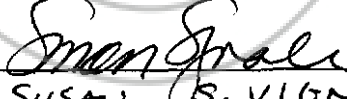
WHEREAS, executed as Trustor, a Deed of Trust wherein WESTERN TITLE COMPANY, INC., a Nevada corporation is Trustee for LAWYERS TITLE INSURANCE CORPORATION as assignee of the Beneficiary under that certain Deed of Trust recorded May 24, 2004, in Book 0504, at Page 11542, as Document No. 0614028 of Official Records, in the office of the County Recorder of Douglas County, Nevada; and

WHEREAS, a Notice of Default and Election to Cause Sale of Real Property Under Deed of Trust was recorded on May 4, 2005, in Book 0505, at Page 01664, as Document No. 0643510 of Official Records, in the office of the County Recorder of Douglas County, Nevada.

NOTICE IS HEREBY GIVEN FURTHER, that the undersigned, as Beneficiary does hereby CANCEL and RESCIND said Notice of Default and Election to Cause Sale of Real Property, without relinquishing any rights granted to them as Beneficiary under the aforesaid Deed of Trust.

Dated: July 28, 2006

LAWYERS TITLE INSURANCE CORPORATION

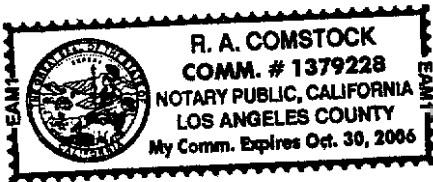

By: SUSAN S. VIGNALE
Its: ASSISTANT SECRETARY

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California }
County of Los Angeles } ss.

On July 28, 2006 before me, R A Comstock
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")
personally appeared Susan J. Ugnale
Name(s) of Signer(s)

- personally known to me
- 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 the instrument.

WITNESS my hand and official seal.
R A Comstock
Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Rescission of Notice of Default

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Signer's Name: _____

- Individual
- Corporate Officer — Title(s): _____
- Partner — Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other: _____

Signer Is Representing: _____

