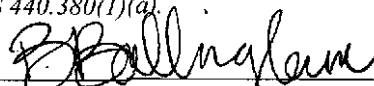


17-
This document includes a certified death certificate as required by NRS 40.525 (5) which contains a social security number as required by NRS 440.380(1)(a).


Brandi Ballingham, Legal Assistant
ANDERSON & DORN, LTD.

APN: 1320-33-711-016 and a Portion of 17-212-05

RECORDING REQUESTED BY:

Anderson & Dorn, Ltd.
500 Damonte Ranch Parkway, Ste, 860
Reno, NV 89521

WHEN RECORDED MAIL TO:

✓ Denice C. Watson
9911 SE Hollywood Ave.
Milwaukie, OR 97222

MAIL TAX STATEMENT TO:

Denice C. Watson, Trustee
9911 SE Hollywood Ave.
Milwaukie, OR 97222

DOC # 0701680
05/23/2007 02:31 PM Deputy: GB
OFFICIAL RECORD
Requested By:
ANDERSON & DORN LTD

Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 4 Fee: 17.00
BK-0507 PG- 7877 RPTT: 0.00



AFFIDAVIT OF DEATH OF TRUSTEE

I, Denice C. Watson, the undersigned, affirm under penalty of perjury under the laws of the State of Nevada that the following is true and correct:

(1) By instrument dated February 20, 1998, Stanley E. Watson and Billie J. Watson executed the Watson Living Trust ("Trust").

(2) Said trust appointed me and Carolyn A. Harasin to serve as Successor Trustees upon the death or incapacity of Stanley E. Watson and Billie J. Watson.

(3) Billie J. Watson died on April 27, 2005, at Gardnerville, Nevada, a resident of Douglas County, Nevada. Attached hereto as Exhibit "A" is a certified copy of the death certificate of said Billie J. Watson. Stanley E. Watson died on March 10, 2007, at Gardnerville, Nevada, a resident of Douglas County, Nevada. Attached hereto as Exhibit "B" is a certified copy of the death certificate of said Stanley E. Watson.

(4) Pursuant to the terms of the Trust, we have assumed the responsibilities of Successor Trustees.

(5) The following described real property is part of the trust estate: See Exhibit "C" attached.

(6) Denice C. Watson and Carolyn A. Harasin are authorized under the terms of the Trust and applicable provisions of the Nevada Revised Statutes to act as the Successor Trustees with respect to the trust's interest in the described property.

(7) No other person has a right to the interest of the Trust in the described property.

(8) The described property shall be transferred to Denice C. Watson and Carolyn A. Harasin) as Successor Trustees.

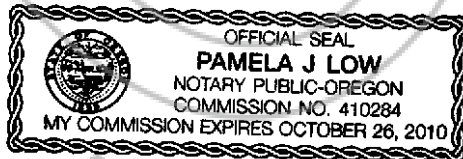
Executed on May 3, 2007, at ^{TIGARD, OREGON}~~Reno, Nevada.~~

Denice C. Watson, TTE
Denice C. Watson, Trustee

OREGON)
STATE OF NEVADA)
WASHINGTON) SS:
COUNTY OF WASHOE)

SUBSCRIBED AND SWORN TO before me this 3rd day of May, 2007.

Pamela J Low
Notary Public



CERTIFICATION OF VITAL RECORD

STATE OF NEVADA
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH
CERTIFICATE OF DEATH

2007001137
 STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK

DECEDENT

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

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

REGISTRAR

CAUSE OF DEATH

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

1a. DECEASED-NAME FIRST Stanley			1b. MIDDLE E			1c. LAST WATSON			2. DATE OF DEATH (Mo/Day/Year) March 10, 2007			3a. COUNTY OF DEATH Douglas											
3b. CITY, TOWN, OR LOCATION OF DEATH Gardnerville			3c. HOSPITAL OR OTHER INSTITUTION -Name (if not either, give street and number) Evergreen Gardnerville Health & Rehab Center						3e. If Hosp. or Inst. Indicate DOA, OP/Emer. Rm. Inpatient (Specify) Inpatient			4. SEX Male											
5. RACE - (e.g., White, Black, American Indian) (Specify) White			6. Was Decedent of Hispanic Origin? If yes; specify Mexican, Cuban, Puerto Rican, etc. No Non-hispanic			7a. AGE-Last birthday (Years) 80			7b. UNDER 1 YEAR MOS DAYS HOURS MINS			7c. UNDER 1 DAY HOURS MINS			8. DATE OF BIRTH (Mo/Day/Yr) December 20, 1926								
9a. STATE OF BIRTH (if not U.S.A. name country) Oregon			9b. CITIZEN OF WHAT COUNTRY United States			10. EDUCATION 14			11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Widowed			12. SURVIVING SPOUSE (if wife, give maiden name)											
13. SOCIAL SECURITY NUMBER [REDACTED]			14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) Technical Manager						14b. KIND OF BUSINESS OR INDUSTRY Telephone														
15a. RESIDENCE - STATE Nevada			15b. COUNTY Douglas			15c. CITY, TOWN OR LOCATION Gardnerville			15d. STREET AND NUMBER 1311 Chichester Drive			15e. INSIDE CITY LIMITS (Specify Yes or No) Yes											
16. FATHER - NAME (First Middle Last Suffix) Harold S WATSON						17. MOTHER - NAME (First Middle Last Suffix) Ivy L BATIS																	
18a. INFORMANT - NAME (Type or Print) Journey HARASIN						18b. MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) 1311 Chichester Drive Gardnerville, Nevada 89410																	
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Removal/Burial						19b. CEMETERY OR CREMATORY - NAME Calvary Cemetery			19c. LOCATION City or Town State Sacramento California														
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) JAMES SMOLENSKI SIGNATURE AUTHENTICATED						20b. FUNERAL DIRECTOR LICENSE 217			20c. NAME AND ADDRESS OF FACILITY FitzHenry's Carson Valley Funeral Home 1380 Highway 395 N. Gardnerville NV 89410														
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) LAURENCE GEORGE GAY M.D. SIGNATURE AUTHENTICATED												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) stated. (Signature & Title)											
21b. DATE SIGNED (Mo/Day/Yr) March 14, 2007						21c. HOUR OF DEATH 20:00			22b. DATE SIGNED (Mo/Day/Yr)			22c. HOUR OF DEATH											
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)												22d. PRONOUNCED DEAD (Mo/Day/Yr)						22e. PRONOUNCED DEAD AT (Hour)					
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Laurence George Gay M.D. Po Box 19936 Reno, NV												23b. LICENSE NUMBER 5152											
24a. REGISTRAR (Signature) MIKE NEUMANN SIGNATURE AUTHENTICATED						24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) March 15, 2007			24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>														
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)												Interval between onset and death											
PART I (a) Cardiac Arrest												Seconds											
(b) Myocardial Infarction												Minutes											
(c) Coronary Artery Disease												Years											
PART II OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not resulting in the underlying cause given in Part I. Ischemic Cardiomyopathy												26. AUTOPSY (Specify Yes or No) No			27. WAS CASE REFERRED TO CORONER (Specify Yes or No) Yes								
28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)			28b. DATE OF INJURY (Mo/Day/Yr)			28c. HOUR OF INJURY			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			STREET OR R.F.D. No.			CITY OR TOWN			STATE								

STATE REGISTRAR

51134

T04821 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 16 2007**

This copy is not valid unless prepared by the State Registrar.

Alv...
 STATE REGISTRAR

BK- 0507
 PG- 7879

0701680 Page: 3 of 4 05/23/2007

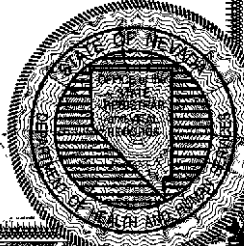
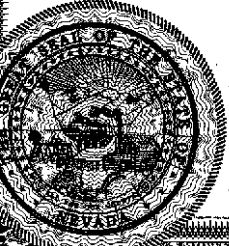


EXHIBIT "C"

LEGAL DESCRIPTION:

Lot 48, Block N, as set forth on Final Subdivision Map FSM-1006 of CHICHESTER ESTATES Phase 1, filed for record in the office of the County Recorder of Douglas County, State of Nevada, on September 12, 1995, in Book 995 at Page 1407, as Document No. 370215.

APN: 1320-33-711-016

PROPERTY ADDRESS: 1311 Chichester Drive, Gardnerville, Nevada

LEGAL DESCRIPTION:

A timeshare estate compromised of an undivided interest as tenants in common in and to that certain real property and improvements as follows:

An undivided 1/1071st interest in and to all that real property situate in the County of Douglas, State of Nevada, described as follows:

ADJUSTED PARCEL F: A parcel of land located within a portion of the West one-half of the Northeast one-quarter (W ½ NE ¼) of Section 22, Township 13 North, Range 19 East, Mount Diablo Meridian, more particularly described as follows:

Commencing at the one-quarter corner common to Sections 15 and 22, T13N, R19E, M.D.M., a found 1985 BLM brass cap as shown on the Record of Survey prepared by David D. Winchell and recorded September 28, 1989 in the office of the Recorder, Douglas County, Nevada as Document No. 211937; thence South 57°32'32" East, 640.57 feet to the POINT OF BEGINNING ; thence North 80°00'00" East, 93.93 feet; thence North 35°00'00" East, 22.55 feet; thence North 10°00'00" West, 92.59 feet; thence North 80°00'00" East, 72.46 feet; thence South 10°00'00" East, 181.00 feet; thence South 80°00'00" West, 182.33 feet; thence North 10°00'00" West, 72.46 feet to the POINT OF BEGINNING.

(Reference is made to Record of Survey for Walley's Partners Ltd. Partnership, in the office of the County Recorder of Douglas County, Nevada, recorded on September 17, 1998 in Book 998, at Page 3261, as Document No. 449576.)

Together with those easements appurtenant thereto and such easements and use rights described in the Declaration of Time Share Covenants, Conditions and Restrictions for David Walley's Resort recorded September 23, 1998, as Document No. 0449993, and as amended by Document Nos. 0466255, 0485265 and 0489959, and subject to said Declaration; with the exclusive right to use said interest for one Use Period within a DELUXE UNIT each year in accordance with said Declaration.

A Portion of APN: 17-212-05

PROPERTY ADDRESS: David Walley's Resort, Every Year Use, Week #17-018-27-01, Genoa, Nevada