

APN#: 1320-33-711-016

Recording Requested By:
Western Title Company, Inc.
Escrow No.: 012150-SSL

Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 6 Fee: 19.00
BK-0607 PG- 6316 RPTT: 0.00




When Recorded Mail To:
Denice C. Watson
9911 SE Hollywood Ave.
Milwaukie, OR
97222

Mail Tax Statements to: (deeds only)
Denice C. Watson
SAME

(space above for Recorder's use only)

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons.
(Per NRS 239B.030)

Signature 
Susan Lapin Agent

This document is being re-recorded to attach the "Exhibit A"

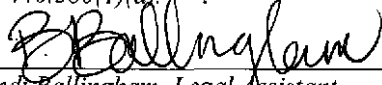
AFFIDAVIT OF DEATH OF TRUSTEE

This page added to provide additional information required by NRS 111.312
(additional recording fee applies)

17-

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

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.

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



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

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.

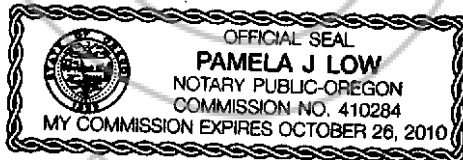
Executed on May 3, 2007 at ^{TIGARD, OREGON} ~~Reno, Nevada~~.

Denice C. Watson, TIE
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
VITAL STATISTICS

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

ROLL 118 IMAGE 157

LOCAL FILE NUMBER

1317

2005 0006654

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK

DECEASED—NAME First Middle Last. DATE OF DEATH (Month, Day, Year) COUNTY OF DEATH
1. Billie J. WATSON 2. April 27, 2005 3a. Washoe
CITY, TOWN OR LOCATION OF DEATH HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number)
3b. Reno 3c. Washoe Medical Center 3e. Inpatient / 4. Female
RACE—(e.g., White, Black, American Indian, etc.) (Specify) Was Decedent of Hispanic Origin? Specify [] yes [X] no If yes, specify Mexican, Cuban, Puerto Rican, etc.
5. White 6. 7a. 80 7b. 7c. 8. September 28, 19[]
STATE OF BIRTH (If not U.S.A., name country) CITIZEN OF WHAT COUNTRY Decedent's Education. Specify highest grade completed. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) SURVIVING SPOUSE (If wife, give maiden name)
9a. California 9b. U.S.A. 10. 14 11. Married 12. Stanley E. Watson
SOCIAL SECURITY NUMBER USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) 313 KIND OF BUSINESS OR INDUSTRY. 842
13. 14a. Secretary 14b. Education
RESIDENCE—STATE COUNTY CITY, TOWN, OR LOCATION STREET AND NUMBER INSIDE CITY LIMITS (Specify Yes or No)
15a. Nevada 15b. Douglas 15c. Gardnerville 15d. 1311 Chichester Dr. 15e. Yes
FATHER—NAME First Middle Last MOTHER—MAIDEN NAME First Middle Last
16. Albert Burley 17. Ina B. Burgess
INFORMANT—NAME (Type or Print) MAILING ADDRESS. (Street or R.F.D. No., City or Town, State, Zip)
18a. Stanley E. Watson - Husband 18b. 1311 Chichester Dr., Gardnerville, Nevada 89410
BURIAL, CREMATION, REMOVAL, OTHER (Specify) CEMETERY OR CREMATORY—NAME LOCATION City or Town State
19a. Burial 19b. Calvary Catholic Cemetery 19c. Sacramento, California
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such) FUNERAL DIRECTOR LICENSE NUMBER NAME AND ADDRESS OF FACILITY
20a. [Signature] 20b. 217 20c. Home, - 1380 Hwy 395, Gardnerville, Nevada 89410
21. To the best of my knowledge, death occurred at the time, date and place and (due to the cause(s) stated.
(Signature and Title) [Signature]
DATE SIGNED (Mo., Day, Yr.) HOUR OF DEATH
21b. [Signature] 21c. 0715
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)
21d.
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.
(Signature and Title) [Signature]
DATE SIGNED (Mo., Day, Yr.) HOUR OF DEATH
22b. 22c.
PRONOUNCED DEAD (Mo., Day, Yr.) PRONOUNCED DEAD (Hour)
22d. ON 22e. AT
NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print) LICENSE NUMBER
23a. Constance Hardy, M.D., 77 Pringle Way, Reno, Nevada, 89502 23b. 10329
REGISTRAR DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) DEATH DUE TO COMMUNICABLE DISEASE
24a. [Signature] Dep. 24b. May 3, 2005 24c. YES [] NO [X]
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) Interval between onset and death
PART I (a) Sepsis DUE TO, OR AS A CONSEQUENCE OF: Interval between onset and death
(b) Pneumonia DUE TO, OR AS A CONSEQUENCE OF: Interval between onset and death
(c) OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I.
PART II 26. No 27. No
ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify) DATE OF INJURY (Mo., Day, Yr.) HOUR OF INJURY DESCRIBE HOW INJURY OCCURRED
25a. 25b. 25c. M 25d.
INJURY AT WORK (Specify Yes or No) PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify) LOCATION. STREET OR R.F.D. No. CITY OR TOWN STATE
26a. 26b. 26c. 26d. 26e. 26f. 26g. 26h.

DECEDENT

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

PARENTS

POSITION

CERTIFIER

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

CAUSE OF DEATH

STATE REGISTRAR

No. 286903

T05615

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 21 2007

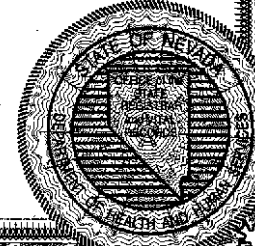
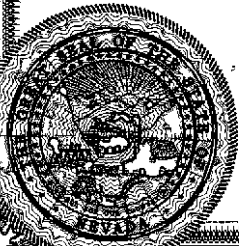
STATE REGISTRAR

This copy is not valid PERNCO (Rev. 11/06)



BK- 0607 PG- 6319

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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

Main form containing fields for deceased name (Stanley E. WATSON), date of death (March 10, 2007), county (Douglas), hospital (Evergreen), race (White), age (80), birth date (December 20, 1926), residence (Nevada), parents (Harold S. WATSON, Ivy L. BATIS), informant (Journey HARASIN), funeral director (James Smolenski), certifier (Laurence George Gay M.D.), registrar (Mike Neumann), and cause of death (Cardiac Arrest, Myocardial Infarction, Coronary Artery Disease, Ischemic Cardiomyopathy).

STATE REGISTRAR

Barcode and page information: 0703428 Page: 5 Of 6 06/20/2007 BK- 0607 PG- 6320

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

Signature of State Registrar

STATE REGISTRAR

Barcode and page information: 0701680 Page: 3 Of 4 05/23/2007 BK- 0507 PG- 7879

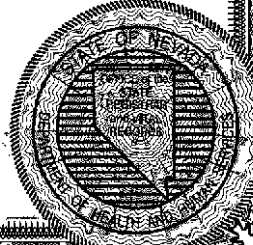
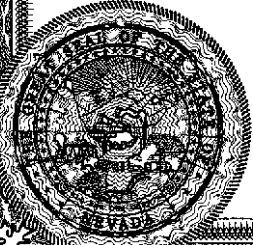


EXHIBIT "C"

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

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PG- 7880
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