

16-

Christine Anest  
19 Birchwood Rd  
Coram, NY 11727

APN: 1319-30-644-007 PTN  
Recording requested by, and please  
send recorded document and  
future tax statements to:  
Frances Anest  
79-09 57th Avenue  
Elmhurst, NY 11373



STATE OF )  
COUNTY OF )

Affidavit of Death  
Pursuant to NRS § 111.365

The affiant, Frances Anest, being first duly sworn, deposes and states that:

1. The affiant is of legal age for the state of Nevada.
2. That Nicholas Anest, the decedent mentioned in the attached certified certificate of death, who died on September 3, 2006, in Bronx, New York, is the same person as Nicholas Anest
3. That the affiant and the decedent were both grantees in that certain special warranty deed dated April 30, 1990, recorded on May 8, 1990, as book/page 590/1184 or instrument # 225566 in the records of Douglas County, Nevada, and executed by the grantor(s) Harich Tahoe Developments to the grantee(s) Frances Anest and Nicholas Anest, wife and husband as joint tenants with right of survivorship covering the real property commonly known as The Ridge Tahoe, City of Stateline, County of Douglas, State of Nevada, more particularly described as: described on Exhibit "A" attached hereto and incorporated herein by this reference

4. That the relationship between the affiant and the decedent was that of:  
Husband and wife

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

In witness whereof, I set my hand this 2 day of March, 2015.

Frances Anest  
Affiant  
Frances Anest  
Print name

Subscribed and sworn to before me on Mar 2, 2015 by Frances Anest

JENNIFER MILLS  
Notary Public State of New York  
No. 01-M16072786  
Qualified in New York County  
Commission Expires April 15, 2018  
Jennifer Mills  
Notary name

EXHIBIT "A" (37)

A TIMESHARE ESTATE COMPRISED OF:

PARCEL ONE:

An undivided 1/102nd interest in and to that certain condominium as follows:

- (A) An undivided 1/106ths interest as tenants-in-common, in and to Lot 37 of Tahoe Village Unit No. 3 as shown on the Ninth Amended Map Recorded July 14, 1988 as Document No. 182057, Official Records of Douglas County, State of Nevada. Except therefrom Units 039 through 080 (Inclusive) and Units 141 through 204 (Inclusive) as shown and defined on that certain Condominium Plan Recorded as Document No. 182057, Official Records of Douglas County, Nevada.
- (B) Unit No. 045 as shown and defined on said Condominium Plan.

PARCEL TWO:

A non-exclusive right to use the real property known as Parcel "A" on the Official Map of Tahoe Village Unit No. 3, recorded January 22, 1973, as Document No. 63805, records of said county and state, for all those purposes provided for in the Declaration of Covenants, Conditions and Restrictions recorded January 11, 1973, as Document No. 63681, in Book 173, Page 229 of Official Records and in the modifications thereof recorded September 28, 1973 as Document No. 69063 in Book 973, Page 812 of Official Records and recorded July 2, 1976 as Document No. 1472 in Book 776, Page 87 of Official Records.

PARCEL THREE:

A non-exclusive easement for ingress and egress and recreational purposes and for the use and enjoyment and incidental purposes over, on and through Lots 29, 39, 40, and 41 as shown on Tahoe Village Unit No. 3 - Seventh Amended Map, recorded April 9, 1986 as Document No. 133178 of Official Records of Douglas County, State of Nevada and such recreational areas as may become a part of said timeshare project, for all those purposes provided for in the Fourth Amended and Restated Declaration of Covenants, Conditions and Restrictions, recorded February 14, 1984, as Document No. 96758 of Official Records of Douglas County, State of Nevada.

PARCEL FOUR:

- (A) A non-exclusive easement for roadway and public utility purposes as granted to Harich Tahoe Developments in deed re-recorded December 8, 1981, as Document No. 63026, being over a portion of Parcel 26-A (described in Document No. 01112, recorded June 17, 1976) in Section 30, Township 13 North, Range 19 East, - and -
- (B) An easement for ingress, egress and public utility purposes, 32' wide, the centerline of which is shown and described on the Seventh Amended Map of Tahoe Village No. 3, recorded April 9, 1986, as Document No. 133178 of Official Records, Douglas County, State of Nevada.

PARCEL FIVE:

The exclusive right to use a unit of the same Unit Type as described in the Declaration of Annexation of The Ridge Tahoe Phase Five recorded on August 18, 1988, as Document No. 184461 of Official Records of Douglas County, in which an interest is hereby conveyed in subparagraph (B) of Parcel One, and the non-exclusive right to use the real property referred to in subparagraph (A) of Parcel One and Parcels Two, Three and Four above for all of the purposes provided for in the Fourth Amended and Restated Declaration of Covenants, Conditions and Restrictions of the Ridge Tahoe, recorded February 14, 1984, as Document No. 96758 of Official Records of Douglas County, during ONE ALTERNATE use week within the Odd numbered years of the Prime SEASON, as said quoted term is defined in the Declaration of Annexation of The Ridge Tahoe Phase Five.

The above described exclusive rights may be applied to any available unit of the same Unit Type on Lot 37 during said use week within said "use season".

# THE CITY OF NEW YORK VITAL RECORDS CERTIFICATE

## DEATH TRANSCRIPT

DATE FILED THE CITY OF NEW YORK - DEPARTMENT OF HEALTH AND MENTAL HYGIENE  
**NEW YORK CITY**  
**DEPARTMENT OF HEALTH AND MENTAL HYGIENE**  
**SEP-08-2006 12:01 PM**

Certificate No. **156-06-037328**

**1. DECEDENT'S LEGAL NAME** NICHOLAS ANEST

MEDICAL CERTIFICATE OF DEATH (To be filled in by the Physician)	Place Of Death	2a. New York City 2b. Borough <b>BRONX</b>	2c. Type of Place 1 <input checked="" type="checkbox"/> Hospital Inpatient 2 <input type="checkbox"/> Emergency Dept./Outpatient 3 <input type="checkbox"/> Dead on Arrival	4 <input type="checkbox"/> Nursing Home/Long Term Care Facility 5 <input type="checkbox"/> Hospice Facility 6 <input type="checkbox"/> Decedent's Residence 7 <input type="checkbox"/> Other Specify	2d. Name of hospital or other facility (if not facility, street address) <b>CALVARY HOSPITAL</b>
	Date and Time of Death	3a. (Month) (Day) (Year-yyyy) <b>SEPTEMBER 3, 2006</b>	3b. Time <b>10 35</b> AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>	4. Sex <b>MALE</b>	5. Date last attended by a Physician mm dd yyyy <b>09 03 2006</b>

6. Certifier: I certify that death occurred at the time, date and place indicated and that to the best of my knowledge traumatic injury or poisoning DID NOT play any part in causing death, and that death did not occur in any unusual manner and was due entirely to NATURAL CAUSES. See instructions on reverse of certificate.

Name of Physician CHARLES KYRIANNIS MD Signature Charles Kyriannis DO M.D.  
 Address 1740 EASTCHESTER RD. BX. NY License No. 136648 Date 9/3/2006

7a. Usual Residence State <b>New York</b>	7b. County <b>Queens</b>	7c. City or Town <b>Elmhurst</b>	7d. Street and Number <b>79-07 57 Avenue</b>	Apt. No.	ZIP Code <b>11373</b>	7e. Inside City Limits? 1 <input checked="" type="checkbox"/> Yes 2 <input type="checkbox"/> No
8. Date of Birth (Month) (Day) (Year-yyyy) <b>July 8, 1929</b>		9. Age at last birthday (years) <b>77</b>		10. Social Security No. <b>[REDACTED] 5688</b>		

11a. Usual Occupation (Type of work done during most of working life. Do not use "retired") Proprietor

11b. Kind of business or industry Nightclubs

12. Aliases or AKAs

13. Birthplace (City & State or Foreign Country) <b>New York, NY</b>	14. Education (Check the box that best describes the highest degree or level of school completed at the time of death)		
	1 <input type="checkbox"/> 8th grade or less; none    4 <input type="checkbox"/> Some college credit, but no degree    7 <input type="checkbox"/> Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA) 2 <input checked="" type="checkbox"/> 9th - 12th grade; no diploma    5 <input type="checkbox"/> Associate degree (e.g., AA, AS)    8 <input type="checkbox"/> Doctorate (e.g., PhD, EdD) or 3 <input type="checkbox"/> High school graduate or GED    6 <input type="checkbox"/> Bachelor's degree (e.g., BA, AB, BS)    9 <input type="checkbox"/> Professional degree (e.g., MD, DDS, DVM, LLB, JD)		

15. Ever in U.S. Armed Forces?  Yes 2  No

16. Marital Status at Time of Death  
 1  Married    3  Married, but separated    5  Widowed  
 2  Divorced    4  Never married    6  Unknown

17. Surviving Spouse's Name (If wife, name prior to first marriage) (First, Middle, Last)  
**Frances Assante**

18. Father's Name (First, Middle, Last) **Michael Anest**

19. Mother's Maiden Name (Prior to first marriage) (First, Middle, Last) **Eva Krias**

20a. Informant's Name **Frances Anest**

20b. Relationship to Decedent **Wife**

20c. Address (Street and Number) Apt. No. City & State ZIP Code  
**79-07 57 Avenue Elmhurst, NY 11373**

21a. Method of Disposition  
 1  Burial    2  Cremation    3  Entombment    4  City Cemetery  
 5  Other Specify

21b. Place of Disposition (Name of cemetery, crematory, other place)  
**Mount Olivet Cemetery**

21c. Location of Disposition (City & State or Foreign Country)  
**Maspeth, New York**

21d. Date of Disposition mm dd yyyy  
**09-07-2006**

22a. Funeral Establishment **FRANERO FUNERAL HOME**

22b. Address (Street and Number) City & State ZIP Code  
**72-27 Grand Avenue Maspeth, NY 11378**

This is to certify that the foregoing is a true copy of a record on file in the Department of Health and Mental Hygiene. The Department of Health and Mental Hygiene does not certify to the truth of the statements made thereon, as no inquiry as to the facts has been provided by law.

*Steven P. Schwartz*  
 Steven P. Schwartz, Ph.D., City Registrar

Do not accept this transcript unless it bears the security features listed on the back. Reproduction or alteration of this transcript is prohibited by §3.21 of the New York City Health Code if the purpose is the evasion or violation of any provision of the Health Code or any other law.

DATE ISSUED **September 06, 2006** DOCUMENT No. **V259147**

**ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE**

