



KAREN ELLISON, RECORDER

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
 Phone: (800) 331-3282 Fax: (818) 662-4141

B. E-MAIL CONTACT AT FILER (optional)
 CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address) 39456 - CDC Small

CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	59320955
	NVNV FIXTURE

File with: Douglas, NV

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	Nguyen	Shereese	D	
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2589 Wildhorse Drive Unit 1		Minden	NV	89423
				COUNTRY
				USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	Nguyen	Francis	H	
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2589 Wildhorse Drive Unit 1		Minden	NV	89423
				COUNTRY
				USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME				
CDC SMALL BUSINESS FINANCE				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2448 Historic Decatur Rd., Suite 200		San Diego	CA	92106
				COUNTRY
				USA

4. COLLATERAL: This financing statement covers the following collateral:
 All fixtures

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:
 Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:
 Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:
 59320955 9517205007

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S SURNAME

Nguyen

FIRST PERSONAL NAME

Sherese

ADDITIONAL NAME(S)/INITIAL(S)

D

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

All Fixtures

The undersigned grantor(s) declare(s):

Documentary transfer tax is \$ 262.60

() computed on full value of property conveyed, or

() computed on full value less value of liens and encumbrances remaining at time of sale

() Unincorporated area: () City of _____, and :

() Realty not sold.

GRANT, BARGAIN, SALE DEED

That CVBP, A NEVADA LIMITED LIABILITY COMPANY in consideration of \$10.00 Dollars, the receipt of which is hereby acknowledged, do hereby Grant, Bargain, Sell and Convey to RONALD W. VOGEL AND CLAUDETTE D. VOGEL, HUSBAND AND WIFE AS JOINT TENANTS WITH RIGHT OF SURVIVORSHIP all that real property in the County of Douglas, State of Nevada, bounded and described as follows:

Lot 12, in Block E as shown on the Official Map of Carson Valley Business Park Phase 1, recorded in the Office of the Douglas County Recorder, State of Nevada on September 21, 1993 in Book 993 at Page 3579 as File No. 318019, Official Records.

Together with all singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

Dated: Aug 31, 1998

CVBP, A NEVADA LIMITED LIABILITY COMPANY
THE GAL SAL COMPANY, A MASSACHUSETTS BUSINESS TRUST ORGANIZATION

[Signature]
BY LEONARD DETRICK, TRUSTEE, MANAGING MEMBER

GCBROKER, INC., A NEVADA CORPORATION

[Signature]
BY GARY COOK, PRESIDENT, MANAGING MEMBER

STATE OF NEVADA)

COUNTY OF Carson City

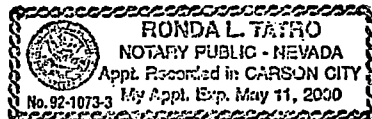
On 8-31-98 personally appeared before me, a Notary Public,

Leonard Detrick & Gary Cook

who acknowledged that he executed the above instrument.

Signature [Signature]
(Notary Public)

WHEN RECORDED MAIL TO:
RONALD W. VOGEL AND CLAUDETTE D. VOGEL
P. O. Box 1635
Zephyr Cove, NV 89448



0448558

BK0998PG0181

COPY

REQUESTED BY
Northern Nevada Title Company
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'98 SEP -1 P3:08

0448558

BK0998PG0182

LINDA SLATER
RECORDER
\$ *8.00* PAID *2* DEPUTY