

APN: 1319-18-214-017

**RECORDING REQUESTED BY AND WHEN RECORDED MAIL TO:**

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c/o ALLING & JILLSON, LTD.  
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Post Office Box 3390  
Lake Tahoe, Nevada 89449-3390

**NOTICE OF DEATH OF TRUSTEE**

**COMES NOW**, Antonia Julie Sinatra-Peterson, being first duly sworn deposes and says:

1. She is a Successor Co-Trustee of The Sinatra Family Trust dated June 7, 2004, as amended and restated in its entirety on July 17, 2012;

2. That Cecilia J. Sinatra was the initial Grantor and Trustee of The Sinatra Family Trust dated June 7, 2004, as amended and restated;

3. That as Trustee, Cecilia J. Sinatra acquired title to the certain real property situate in the County of Douglas, State of Nevada, APN 1319-18-214-017, described as follows:

Lot 17, as shown on the map of CHALET VILLAGE, filed for record in the office of the County Recorder of Douglas County, State of Nevada, on October 25, 197 in Book 1077, Page 1472, as Document No. 14332.

4. That Cecilia J. Sinatra died on July 2, 2022 in Jefferson County, Colorado, being at the time of her death, a resident of Douglas County, Nevada. The State of Colorado issued a Death Certificate, No. 1052022023684, a copy of which is attached hereto as **Exhibit A** and incorporated herein by reference.

5. Pursuant to Article VII, Section 7.02 B. the trust instrument states "In the event of the death of CECILIA J . SINATRA or any reason whatsoever she ceases to serve as Trustee hereunder, the Grantor nominates and appoints JOSEPH PAUL SINATRA and ANTONIA JULIE SINATRA-PETERSON to serve as Co-Trustees hereunder without the approval of any court. In the event of the death of either JOSEPH or ANTONIA, or if for any reason whatsoever either ceases to serve as Successor Co-Trustee hereunder, then the children in the following order shall succeed as Successor Co-Trustee to serve without the approval of any court:

MICHAEL JOHN SINATRA  
MARILYN ROSE SINATRA  
ROSANNE SNYDER."

6. Cecilia J. Sinatra ceased to act as Trustee of the Sinatra Family Trust effective August 19, 2019.

7. Joseph Sinatra resigned as Successor Co-Trustee effective September 4, 2019, and appointed Antonia Julie Sinatra-Peterson and Michael John Sinatra as Co-Trustees. Pursuant to the Resignation of Trustee, Appointment and Acceptance of Successor Co-Trustees.

8. Now, therefore, be it known that the Successor Co-Trustees under the terms of said Trust are Antonia Julie Sinatra-Peterson and Michael John Sinatra.

IN WITNESS WHEREOF, Successor Co-Trustee Antonia Julie Sinatra-Peterson has executed this document on this 29 day of August, 2022.

**THE SINATRA FAMILY TRUST**

  
**ANTONIA JULIE SINATRA-PETERSON,**  
**Successor Co-Trustee**

STATE OF ARIZONA )  
 ) ss.  
COUNTY OF COCONINO )

On this 29 day of August, 2022, before me personally appeared Antonia Julie Sinatra-Peterson, whose identity was proven on the basis of satisfactory evidence to be the person who she claims to be, and acknowledged that she executed the attached document.

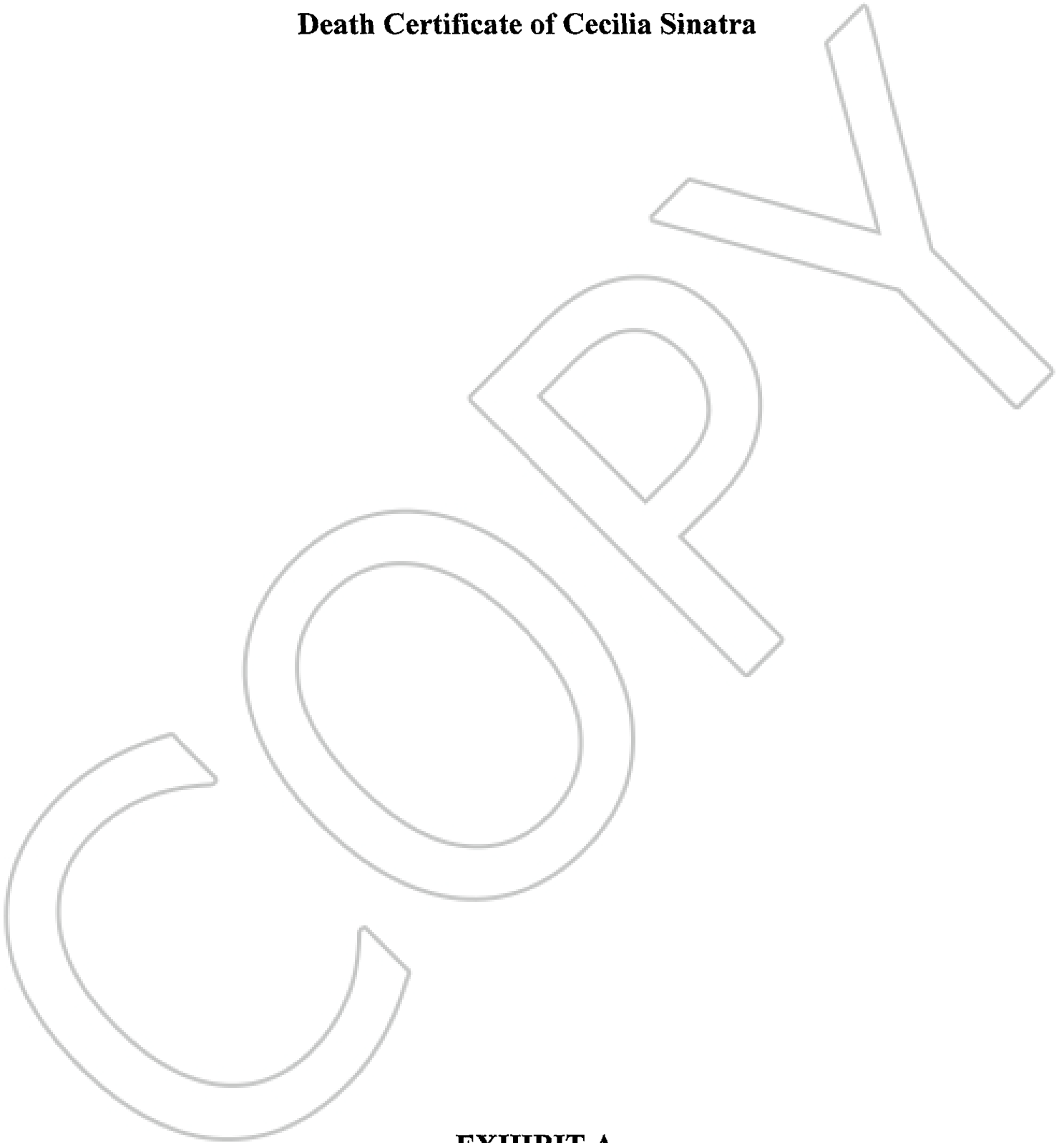
  
NOTARY PUBLIC

(seal)  
(Affix Seal Here)



**EXHIBIT A**

**Death Certificate of Cecilia Sinatra**



**EXHIBIT A**

# STATE OF COLORADO

## CERTIFICATION OF VITAL RECORD

### CERTIFICATE OF DEATH

STATE FILE NUMBER 1052022023684

DECEDENT'S LEGAL NAME CECILIA JOANNE SINATRA				DATE OF DEATH JULY 02, 2022				
SEX FEMALE	SOCIAL SECURITY NUMBER [REDACTED] 8347	AGE-Last Birthday (Years) 87	UNDER 1 YEAR Months: _____ Days: _____		UNDER 1 DAY Hours: _____ Minutes: _____		DATE OF BIRTH (Mo/Day/Yr) MARCH 29, 1935	BIRTHPLACE (State or Foreign Country) NEVADA
IF DEATH OCCURRED IN HOSPITAL			IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL NURSING HOME/LONG TERM CARE FACILITY					
Facility Name (If not institution, give street & number) SERENITY HOUSE ASSISTED LIVING - LAKEWOOD				CITY, TOWN OR LOCATION OF DEATH LAKEWOOD		COUNTY OF DEATH JEFFERSON		
RESIDENCE - STREET AND NUMBER 463 ANDRIA DRIVE				APT. NO.		ZIP CODE 89449	INSIDE CITY LIMITS YES	
RESIDENCE STATE NEVADA			COUNTY DOUGLAS		CITY OR TOWN STATELINE			
DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired) MUSICIAN				KIND OF BUSINESS/INDUSTRY EDUCATION		DECEDENT'S EDUCATION BACHELOR'S DEGREE		
DECEDENT OF HISPANIC ORIGIN NO				DECEDENT'S RACE White				
EVER IN US ARMED FORCES NO		MARITAL STATUS AT TIME OF DEATH DIVORCED		SPOUSE/PARTNER NAME (If wife give name prior to first marriage)				
FATHER'S NAME MADELINE SCHULER				MOTHER'S NAME PRIOR TO FIRST MARRIAGE JOSEPH HEINZ				
INFORMANT'S NAME MICHAEL SINATRA				INFORMANT'S RELATIONSHIP TO DECEASED CHILD				
NAME OF FUNERAL HOME IN MEMORIAM FUNERAL HOME				CITY AND STATE OF FUNERAL HOME BROOMFIELD COLORADO		WAS CORONER NOTIFIED YES		
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION NORTH METRO CREMATORY			LOCATION - CITY, COUNTY, STATE BROOMFIELD BROOMFIELD COLORADO			
INJURY AT WORK		IF TRANSPORTATION RELATED, SPECIFY		DATE OF INJURY		TIME OF INJURY		
PLACE OF INJURY								
LOCATION OF INJURY (Street & Number, Apt. No., City or Town, County, State, ZipCode)								
DESCRIBE HOW INJURY OCCURRED								
WAS DECEDENT UNDER HOSPICE CARE YES		ACTUAL OR PRESUMED TIME OF DEATH 11:00 AM		DATE PRONOUNCED DEAD (MO/DAY/YR) JULY 02, 2022		TIME PRONOUNCED DEAD 11:30 AM		
MANNER OF DEATH NATURAL				WAS AN AUTOPSY PERFORMED NO		WERE AUTOPSY FINDINGS CONSIDERED IN DETERMINING THE CAUSE OF DEATH?		
<b>CAUSE OF DEATH</b>								
PART I		Enter the <u>chain of events</u> -diseases, injuries, or complications- that directly caused the death.				Approximate interval: Onset to death		
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a ALZHEIMER'S DEMENTIA				5 YEARS		
Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death)		b _____				_____		
		c _____				_____		
		d _____				_____		
PART II Enter other <u>significant conditions contributing to death</u> but not resulting in the underlying cause given in PART I								
N/A								
TITLE, NAME, ADDRESS, ZIP CODE AND COUNTY OF PHYSICIAN SHAD T. GRUBBS MD 1606 PRAIRIE CENTER PARKWAY 310 BRIGHTON CO 80601						DATE SIGNED JULY 05, 2022		
TITLE, NAME, ADDRESS, ZIP CODE AND COUNTY OF CORONER						DATE SIGNED		
DATE FILED BY REGISTRAR JULY 05, 2022								

DATE ISSUED **JULY 05, 2022**

THIS IS A TRUE CERTIFICATION OF NAME AND FACTS AS RECORDED IN THIS OFFICE. Do not accept unless prepared on security paper with engraved border displaying the Colorado state seal and signature of the Registrar. PENALTY BY LAW, Section 25-2-118, Colorado Revised Statutes, 1982, if a person alters, uses, attempts to use or furnishes to another for deceptive use any vital statistics record. NOT VALID IF PHOTOCOPIED.

*A. Alex Quintana*  
A. ALEX QUINTANA  
STATE REGISTRAR



REV 01/19

