

DOUGLAS COUNTY, NV      **2023-993695**  
Rec:\$40.00  
\$40.00      Pgs=2      02/07/2023 10:36 AM  
WHITE ROCK GROUP, LLC  
SHAWNYNE GARREN, RECORDER

After recording, please return to:  
White Rock Group, LLC  
700 South 21<sup>st</sup> Street  
Fort Smith, AR 72901

Prepared by or under the supervision of:  
Hayes, Johnson & Conley, PLLC  
700 South 21<sup>st</sup> Street  
Fort Smith, AR 72901

Contract No: 000570503474  
APN: 1318-15-817-001 PTN

### **AFFIDAVIT TERMINATING RIGHT OF SURVIVORSHIP**

I, **Christopher B. Conley**, the Affiant, being of legal age, and being duly sworn on oath do depose and say:

That **JOAN M ROBSON**, the decedent mentioned in the attached certified Certificate of Death, who died on **June 14, 2021** in **Hillsborough County**, State of **Florida** and who was a resident of the State of **Florida**.

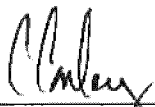
That at the time of death, said decedent was the owner in joint tenancy with **James Patrick Robson Jr** in that certain deed recorded on **07/28/2005**, in Official records Instrument No **650682** of the Public Records of Douglas County Nevada, the following described property:

A **105,000/138,156,000** undivided fee simple interest as tenants in common in **Units 7101, 7102, 7103, 7201, 7202, 7203, 7301, 7302 and 7303 in South Shore Condominium** ("Property"), located at 180 Elks Point Road in Zephyr Cove, Nevada 89449, according to the Final Map #01-026 and Condominium Plat of South Shore filed of recorded in Book 1202, Page 2181 as Document Number 559872 in Douglas County, Nevada, and subject to all provisions thereof and those contained in that certain Declaration of Condominium - South Shore ("Timeshare Declaration") dated October 21, 2002 and recorded December 5, 2002 in Book 1202, Page 2182 as Instrument Number 559873, and also subject to all the provisions contained in that certain Declaration of Restrictions for Fairfield Tahoe at South Shore and recorded October 28, 2004 in Book 1004, Page 13107 as Instrument Number 628022, Official Records of Douglas County, Nevada, which subjected the Property to a timeshare plan called Fairfield Tahoe at South Shore ("Timeshare Plan").

The Property is a(n) **BIENNIAL** Ownership Interest as described in the Declaration of Restrictions for Grand Desert Resort and such ownership interest has been allocated **210,000** Points as defined in the Declaration of Restrictions for Grand Desert Resort which Points may be used by the Grantee in every **ODD** Resort Year.

Affiant has no familial relation to either joint tenant or the deceased spouse, whichever is applicable.

Dated this 7 day of February, 2023.

  
\_\_\_\_\_  
Christopher B. Conley, the Affiant

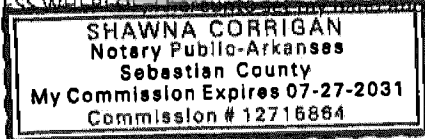
State of ARKANSAS §

County of SEBASTIAN §

On this 7 day of February, 2023, before me, a Notary Public, within and for said County and State, duly commissioned and acting, appeared, Christopher B. Conley, to me personally well-known or proven with valid identification, as the person(s) who executed the foregoing Affidavit.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

[SEAL]



\_\_\_\_\_  
Notary Public: Shawna Corrigan  
My commission expires: 07-27-2031  
Commission No.: 12715864

## BUREAU of VITAL STATISTICS

## CERTIFICATION OF DEATH

STATE FILE NUMBER: 2021116956

DATE ISSUED: JUNE 28, 2021

## DECEDENT INFORMATION

DATE FILED: JUNE 25, 2021

NAME: JOAN M ROBSON

DATE OF DEATH: JUNE 14, 2021

SEX: FEMALE

AGE: 067 YEARS

DATE OF BIRTH: APRIL 27, 1954

SSN: \*\*\*-\*\*-2804

BIRTHPLACE: HENDERSON, NEVADA, UNITED STATES

PLACE WHERE DEATH OCCURRED: EMERGENCY ROOM/OUTPATIENT

FACILITY NAME OR STREET ADDRESS: ST JOSEPHS HOSPITAL - SOUTH

LOCATION OF DEATH: RIVERVIEW, HILLSBOROUGH COUNTY, 33578

RESIDENCE: 9404 CHART HOUSE COURT, RIVERVIEW, FLORIDA 33578, UNITED STATES

COUNTY: HILLSBOROUGH

OCCUPATION, INDUSTRY: BOOKKEEPER, ARMED FORCES

EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE

EVER IN U.S. ARMED FORCES? NO

HISPANIC OR HAITIAN ORIGIN? NO, NOT OF HISPANIC/HAITIAN ORIGIN

RACE: WHITE

## SURVIVING SPOUSE / PARENT NAME INFORMATION

(NAME PRIOR TO FIRST MARRIAGE, IF APPLICABLE)

MARITAL STATUS: MARRIED

SURVIVING SPOUSE NAME: JAMES P ROBSON JR

FATHER'S/PARENT'S NAME: CHARLES WILLIAM ROBESON

MOTHER'S/PARENT'S NAME: VALERIE J REYNOLDS

## INFORMANT, FUNERAL FACILITY AND PLACE OF DISPOSITION INFORMATION

INFORMANT'S NAME: JAMES R ROBSON JR

RELATIONSHIP TO DECEDENT: SPOUSE

INFORMANT'S ADDRESS: 9404 CHART HOUSE COURT, RIVERVIEW, FLORIDA 33578, UNITED STATES

FUNERAL DIRECTOR/LICENSE NUMBER: ALLEN STORMS, F045730

FUNERAL FACILITY: SERENITY MEADOWS MEMORIAL PARK & FUNERAL HOME F088465  
6919 PROVIDENCE RD, RIVERVIEW, FLORIDA 33578

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: RIVERSIDE CREMATORY  
RIVERVIEW, FLORIDA

## CERTIFIER INFORMATION

TYPE OF CERTIFIER: CERTIFYING PHYSICIAN

MEDICAL EXAMINER CASE NUMBER: NOT APPLICABLE

TIME OF DEATH (24 HOUR): 2100

DATE CERTIFIED: JUNE 23, 2021

CERTIFIER'S NAME: EMILY ANN OSTROWSKI

CERTIFIER'S LICENSE NUMBER: ME130676

NAME OF ATTENDING PHYSICIAN (IF OTHER THAN CERTIFIER): NOT ENTERED

The first five digits of the decedent's Social Security Number has been redacted pursuant to §119.071(5), Florida Statutes.



, STATE REGISTRAR

REQ: 2022861355

THE ABOVE SIGNATURE CERTIFIES THAT THIS IS A TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE.

## WARNING:

THIS DOCUMENT IS PRINTED OR PHOTOCOPIED ON SECURITY PAPER WITH WATERMARKS OF THE GREAT SEAL OF THE STATE OF FLORIDA. DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATERMARKS. THE DOCUMENT FACE CONTAINS A MULTICOLORED BACKGROUND, GOLD EMBOSSED SEAL, AND THERMOCHROMIC FL. THE BACK CONTAINS SPECIAL LINES WITH TEXT. THE DOCUMENT WILL NOT PRODUCE A COLOR COPY.

DH FORM 1946 (03-13)

CERTIFICATION OF VITAL RECORD



\* 4 1 8 2 3 6 3 5 \*

VOID IF ALTERED OR ERASED

VOID IF ALTERED OR ERASED

