

FOR FILING WITH THE OFFICE OF THE
KLAMATH COUNTY CLERKNOTICE OF
CLAIM OF LIENTotal Amount of Lien Claimed \$178.00F.R. & S.S. FLORES &
WELLS FARGO REALTY CO.

(Name of Debtor)

PO Box 936

(Street)

Newbury Pk.

CA

91320

(City)

(County)

(State)

(Zip)

OREGON SHORES BEACH CLUB, INC.

(Name of Claimant)

38000 Modoc Point Road

(Street)

Chiloquin

OR

97624

(City)

(State)

(Zip)

The undersigned, OREGON SHORES BEACH CLUB, INC., claims a lien upon the following property located in Oregon Shores Unit #1, Tract 1053 BL 4 LT 7

for the years and amounts listed herein '92-'93 \$79.00 & '93-'94 \$79.00

plus late charges for the years and amounts listed herein '92-'93 \$10.00 & '93-'94 \$10.00

This lien is claimed against the property listed above regardless of any sale to another person in the future (pursuant to Declarations of Restrictions of Oregon Shores Subdivision, No. 4. CLUB MEMBERSHIP, pages 4&5).

F.R. & S.S. FLORES &

The name of the owner charged with this lien is WELLS FARGO REALTY CO.

CLAIMANT'S DEMAND \$ 178.00

The amount for which this lien is claimed is a true and bona fide existing debt as of the date of filing of this notice of claim of lien. The date on which payment was due claimant for annual assessments and/or late charges was September 15, 1993.

STATE OF OREGON, County of Klamath ss.I, OREGON SHORES BEACH CLUB, INC. the claimant

named in the foregoing notice of claim of lien, being first duly sworn, depose and say that I know the contents thereof and that the statements and claims made therein are in all respects correct and true, as I verily believe.

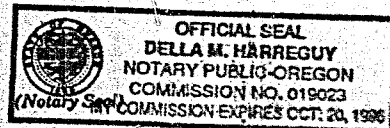
[Signature]
(Claimant's or company rep's signature)

Board Chairman

Signed and sworn to (or affirmed) before me on

September 28 1993Della M. Harreguy

(Notary Public)

My Commission expires: 10-20-96

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of _____ the 4th day
of Oct. A.D., 19 93 at 9:41 o'clock A M., and duly recorded in Vol. M93
of _____ Co. Lien Docket _____ on Page 25648

Evelyn Biehn - County Clerk

By [Signature]

FEE \$5.00