

M06-12912

Klamath County, Oregon

06/23/2006 02:41:40 PM

Pages 2 Fee: \$26.00



7434105

After recording return to:

DENNIS C HITT
 JANIS HITT
 25420 N POE VALLEY RD
 Klamath Falls OR 97603

File No.: 7021-791743 (ALF)
 Date: April 11, 2006

THIS SPACE RESERVED FOR RECORDER'S USE

APPOINTMENT OF SUCCESSOR TRUSTEE

The undersigned hereby state that they are the owner and holder of the beneficial interest in that certain trust deed:

Grantor: Dennis C. Hitt and Janis Hitt
 Trustee: Amerititle, an Oregon Corporation
 Beneficiary: Bailey Livestock, Inc., an Oregon Corporation as to an
 undivided 1/2 interest
 Dated: August 26, 2003
 Recorded: September 4, 2003
 Recorder's Number: M-03 65375
 Records of: Klamath County

That the undersigned hereby appoints First American Title Insurance Company of Oregon as Successor Trustee with all rights, interest and power, including, without limitation, the right to reconvey our interest, as granted the original Trustee in the above referenced trust deed.

Dated this 14 day of APR, 2006.

Donald L. Bailey, P.s.
 Bailey Livestock, Inc., an Oregon Corporation as to
 an undivided 1/2 interest

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

STATE OF CALIFORNIA)

COUNTY OF Shasta)

On 4/14/06 before me,

DATE

Carolyn K. Price, Notary Public
NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"

personally appeared, Donald L. Bailey

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Carolyn
NOTARY PUBLIC SIGNATURE

(SEAL)



OPTIONAL INFORMATION

THIS OPTIONAL INFORMATION SECTION IS NOT REQUIRED BY LAW BUT MAY BE BENEFICIAL TO PERSONS RELYING ON THIS NOTARIZED DOCUMENT.

TITLE OR TYPE OF DOCUMENT _____

DATE OF DOCUMENT _____

NUMBER OF PAGES _____

SIGNER(S) OTHER THAN NAMED ABOVE _____

SIGNER'S NAME _____

SIGNER'S NAME _____

RIGHT THUMBPRINT

RIGHT THUMBPRINT