

Recording Requested By:  
Jennifer Nichols, Successor Trustee  
Peter Gorog, Successor Trustee  
1011 Shipman Lane  
McLean, Virginia 22101

2026-000293  
Klamath County, Oregon  
01/12/2026 10:52:01 AM  
Fee: \$107.00

When Recorded Mail Document  
And Tax Statements To:  
Land Equities Inc.  
711 Medford Center #108  
Medford, Oregon 97504

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### Warranty Deed

APN: 290679

Previous Doc. Number: 2000-030230

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, **JENNIFER NICHOLS and PETER GOROG, Successor Trustees of the Amended Agreement of Trust for William F. Gorog dated April 1, 1993** (Grantor), does hereby convey to **LAND EQUITIES INC.** (Grantee), an Oregon Corporation, the following described real property situated in the County of Klamath, State of Oregon:

A portion of the S1/2N1/2NW1/4SW1/4 of Section 5, Township 35 South, Range 12 East of the Willamette Meridian, more particularly described as follows:

Beginning at a point which is the intersection of the South line of the S1/2N1/2NW1/4SW1/4 and the Westerly line of the Sycan River; thence Westerly along the South line a distance of 280 feet to the true point of beginning; thence continuing West along the South line a distance of 280 feet to a point; thence North 150 feet to a point; thence East 280 feet to a point; thence South 150 feet to the point of beginning.

SUBJECT TO all conditions, covenants, reservations, restrictions, easement, rights and rights of way of record, official records of said county and state.

And the Grantor binds itself and its successors to warrant the title against its acts and none other, subject to the matters above set forth.

The true consideration for this conveyance is \$0.00. (Here comply with the requirements of ORS 93.030)

APN: 290679

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300 (Definitions for ORS 195.300 to 195.336), 195.301 (Legislative findings) AND 195.305 (Compensation for restriction of use of real property due to land use regulation) TO 195.336 (Compensation and Conservation Fund) AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 (Definitions for ORS 92.010 to 92.192) OR 215.010 (Definitions), TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES, AS DEFINED IN ORS 30.930 (Definitions for ORS 30.930 to 30.947), AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300 (Definitions for ORS 195.300 to 195.336), 195.301 (Legislative findings) AND 195.305 (Compensation for restriction of use of real property due to land use regulation) TO 195.336 (Compensation and Conservation Fund) AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010.

**Signature Page to Follow**

Unofficial  
Copy

DATED: 12/26/2025

BY: Jennifer Nichols Successor Trustee  
**JENNIFER NICHOLS, Successor Trustee**  
**Amended Agreement of Trust for William F. Gorog dated April 1, 1993**

BY: \_\_\_\_\_  
**PETER GOROG, Successor Trustee**  
**Amended Agreement of Trust for William F. Gorog dated April 1, 1993**

STATE OF VIRGINIA )

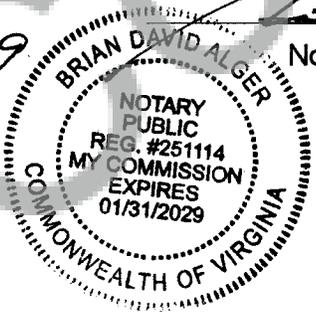
) ss.

COUNTY OF FAIRFAX )

On 12/26/2025, before me, the undersigned Notary Public, personally appeared **JENNIFER NICHOLS ~~and PETER GOROG~~**, 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.

My Commission Expires: 01.31.2029 Brian David Alger Notary Public



DATED: 12/30/2025

BY: \_\_\_\_\_  
**JENNIFER NICHOLS, Successor Trustee**  
**Amended Agreement of Trust for William F. Gorog dated April 1, 1993**

BY: Peter S. Successor Trustee  
**PETER GOROG, Successor Trustee**  
**Amended Agreement of Trust for William F. Gorog dated April 1, 1993**

STATE OF Florida )

) ss.

COUNTY OF Palm Beach )

On 12/30/2025, before me, the undersigned Notary Public, personally appeared **JENNIFER NICHOLS** and **PETER GOROG**, 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.

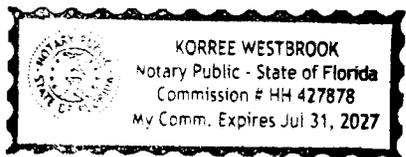
*provided Virginia DL B24696796*

WITNESS my hand and official seal.

My Commission Expires: 07/31/2027

[Signature]

Notary Public



VERIFY PRESENCE OF WATERMARK HOLD TO LIGHT TO VIEW

11882610

COMMONWEALTH OF VIRGINIA DEPARTMENT OF HEALTH - OFFICE OF VITAL RECORDS

COMMONWEALTH OF VIRGINIA - CERTIFICATE OF DEATH DEPARTMENT OF HEALTH - DIVISION OF VITAL RECORDS - RICHMOND

Form with fields for decedent (William Francis Gorog), date of death (July 14, 2002), place of death (Inova Fairfax Hospital), usual residence (Florida), and cause of death (Cerebral Aneurysm).

MAINTAIN PRESERVED FOR ARCHIVING... IMPORTANT: Use black ribbon in tabular or pictorial or plain legibly with ballpoint pen...

VS 2 100



This is to certify that this is a true and correct reproduction or abstract of the official record filed with the Virginia Department Of Health, Richmond, Virginia DATE ISSUED December 19, 2025

Seth Austin, Director and State Registrar

Do not accept unless on security paper with the seal of Virginia Department of Health, Vital Statistics in the lower left hand corner. Section 32.1-272, Code of Virginia, as amended.

VS 15B

VOID WITHOUT WATERMARK OR IF ALTERED OR ERASED