

CERTIFIED EXTRACT OF TRUST AGREEMENT

GARRY W. DAVIS &/or LINDA M. DAVIS
Trustees for
THE DAVIS FAMILY TRUST

State of California) SS.
County of Contra Costa)

THE UNDERSIGNED, being duly sworn, depose and certify:

1. That Garry W. Davis, born February 3, 1948, social security number , and Linda M. Davis, born January 26, 1948, social security number , as Settlers and and trustees, executed a Declaration of Trust, and that said Declaration of Trust is not of record in any court. Said Declaration of Trust is entitled The Davis Family Trust Dated November 29th, 1997.

2. That the present beneficiaries under the terms of said Declaration of Trust are the Settlers so long as one or both are living and the Settlers' daughter's & grandchild that are listed as beneficiaries and designated in the Declaration of Trust.

3. That the power and authority of the Trustee(s)/Successor Trustee(s) with respect to the trust property include, by way of illustration, the following:

A. To apply for and receive life insurance on the life of any person; to accept the ownership and beneficial interest of life insurance, which may be transferred to the Trustee without responsibility as to the payment of premiums. The insuring companies have no responsibility other than to pay the proceeds of the policies to the named beneficiary and are not required to examine the Declaration of Trust at any time;



B. To sell, convey, lease, exchange, abandon, pledge for security, and exercise all the rights, powers and privileges which an absolute owner of the same property, which in his or her discretion the Trustee chooses to receive subject to this Declaration of Trust and subject to California Civil Code Sections 5125 and 5127 with respect to community property of the Settlers;



C. To open bank accounts, borrow money with or without security, to receive all dividends, interest, and other income, and to compromise and settle claims. To purchase, sell or retain stocks, securities, mutual funds, mortgages and other investments. Any, and all bank accounts, including checking and savings accounts, established in the name of any Trust established by the Declaration of Trust by the

-Certified Extract-

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Trustee, shall be subject to withdrawal, and all checks, drafts, and other obligations of the Trust shall be honored by said depositories upon the signature of the Trustee or Successor Trustee.

The banking institution that establishes accounts pursuant to this paragraph is advised that there is nothing in the Declaration of Trust that requires the banking institution to exercise any discretion other than that required in normal banking procedures;

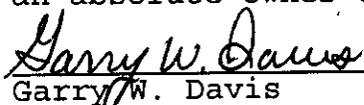
D. To exercise without notice, hearing, confirmation or approval of any Court, each and every power enumerated in § 16200-16249 (Trustee's powers) of the Probate Code of California in effect at the date of this agreement unless otherwise stated in this Declaration of Trust;

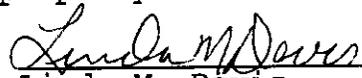
E. Trustees have the specific power to buy, sell and trade in securities of any nature on margin or otherwise, including options, commodities and short sales and for such purpose may maintain and operate brokerage accounts with brokers.

4. Settlers are empowered to designate Trustees and Successor Trustees, and have appointed Cynthia M. Novak, to serve as Successor Trustee; however should she become unable because of death, incapacity or any other cause, to serve as a Successor Trustee, or should resign as a Successor Trustee, before the natural termination of all the Trusts provided for in this Declaration, then Jennifer M. Bornstein shall be appointed to serve as the first alternate successor trustee.

The Settlers reserve the right to appoint other Trustees or successor Trustees and to remove any Trustee or Trustees from office at any time while they both shall live. Unless otherwise stated in writing by the Settlers, the Trustees and successor Trustees of the Declaration of Trust shall be considered to be those mentioned above.

5. That enumeration of certain powers of the Trustee shall be interpreted neither in derogation of any right of the Trustee under the law nor, as restricting the discretion a prudent person would use in the management of property held for the benefit of others; such enumeration shall not limit its general powers in dealing with third persons, the Trustee being vested with and having all rights, duties, powers and privileges which an absolute owner of the same property would have.


Garry W. Davis


Linda M. Davis

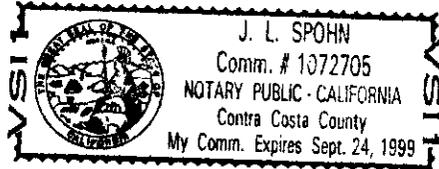
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SUBSCRIBED AND SWORN on January 15th, 1998, before me, a notary for the state of California, personally appeared Garry W. Davis and Linda M. Davis, who proved to me on the basis of satisfactory evidence to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument.

WITNESS my hand and official seal.

My commission expires;
9-24-99


NOTARY PUBLIC, State of
California



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CERTIFIED EXTRACT OF TRUST AGREEMENT

As you begin changing titles, or buying and selling real estate on behalf of your Trust, some institutions may insist upon having a copy of, or reviewing your trust, so that they will know it is valid. For example, a Title company for real estate transactions or your bank will probably want verification of your trust before conveying your accounts, safe deposit box, etc. But you may not want them to see your entire trust and legally you are under no obligation to furnish a copy of your trust. Therefore, all you need is a copy of your notarized Certified Extract of Trust Agreement. *

This trust was prepared by
Living Trust Systems
MICHAEL S. LANDERS
~~300~~ 300 E. LELAND AVE #105
Pittsburg, CA 94565
510-439-9132

BIRTH CERTIFICATE

This Certifies

That Linda Marie Clark was born in

St. Anthony's Hospital, Morrilton, Arkansas

at 7:20 a m Monday the 26th day of January A. D. 19 48

In Witness Whereof the said Hospital has caused this certificate to be signed by its duly authorized officer and its Corporate Seal to be hereunto affixed.

Sister M. Nilda
Superintendent

Attending Physician

Family History

Father's full name Lawrence Ray Clark

Birthplace Morrilton Ark Date Feb. 29 1925

Mother's maiden name Ruby Lee Baker

Birthplace Morrilton Ark Date Nov. 11 1928
1928

Form BH-41N-Rev.-1923-4-24-121041-C-M.H.

ARKANSAS STATE BOARD OF HEALTH—BUREAU OF VITAL STATISTICS

DELAYED BIRTH CERTIFICATE

(Do Not Write In This Space)

1. PLACE OF BIRTH OF CHILD: County Greene
City or Town Paragould, Arkansas
Street No. or Rural Route _____

6293

DELAYED

2. FULL NAME AT BIRTH Garry Wayne Davis

3. Is Child Male or Female?

male

4. What is Child's color or race?

white

5. What was date of Child's Birth?

February 3, 1948
(Month) (Day) (Year)

6. FATHER FATHER
Full Name Ray H. Davis

7. Where was Father living at the time of this birth? Antioch

8. What is Father's color? white 9. What was Father's age at time of birth? 21 yrs.

10. In what State or Country was Father born? Oklahoma

15. Number of Children born to this Mother up to and including this child? one

11. MOTHER MOTHER
Maiden Name Bonnie Williams

12. Where was Mother living at the time of this birth? Paragould, Arkansas

13. What is Mother's color? white 14. What was Mother's age at time of birth? 20 yrs.

15. In what State or Country was Mother born? Missouri

AFFIDAVIT

State of California
County of Contra Costa

I hereby swear under oath in full knowledge of the penalties of the law for false statement that, to my best knowledge and belief, the facts above stated are true and correct in every particular. I am related to this child as Father (Attending physician, midwife, parent, or person at least twelve years older having knowledge of birth) and my present age is _____ years.

(Signed) Ray H. Davis

Subscribed in my presence and sworn to before me this 28th day of August, 1954

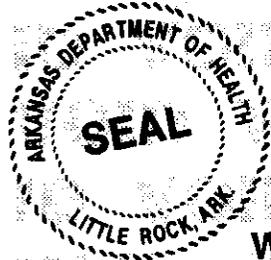
(Notary Public or Other Official Empowered to Execute Oaths)

My Commission Expires May 18, 1958

(Do Not Write Below This Line)

Filed Sept. 29, 1954

J. T. Herron, M.D. State Registrar



THIS IS TO CERTIFY THAT THE ABOVE IS A TRUE AND CORRECT COPY OF THE CERTIFICATE ON FILE IN THE ARKANSAS DEPARTMENT OF HEALTH.

DEC 15 00

Sharon M. Leinbach
State Registrar

WARNING:

A REPRODUCTION OF THIS DOCUMENT RENDERS IT VOID AND INVALID, DO NOT ACCEPT UNLESS EMBOSSED SEAL OF THE ARKANSAS DEPARTMENT OF HEALTH IS PRESENT. IT IS ILLEGAL TO ALTER OR COUNTERFEIT THIS DOCUMENT.

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