

5/22/01

REFERENCE DOCUMENT ID NO. 1C

06-01-2001

U.S. DEPARTMENT OF COMMERCE
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Form PTO-1594 F
(Rev. 03/01)
OMB No. 0651-0027 (exp. 5/31/2002)
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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):
Nut Tree
(Formerly) - Nut Tree, a California Partnership; Nut Tree
 Individual(s) Association
 General Partnership Limited Partnership
 Corporation-State
 Other _____
Additional name(s) of conveying party(ies) attached? Yes No

2. Name and address of receiving party(ies)
Name: Vacaville Redevelopment Agency
Internal
Address: _____
Street Address: 650 Merchant Street
City: Vacaville State: CA Zip: 95688
 Individual(s) citizenship _____
 Association _____
 General Partnership _____
 Limited Partnership _____
 Corporation-State _____
 Other A redevelopment agency formed under the Community Redevelopment Law
If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
(Designations must be a separate document from assignment)
Additional name(s) & address(es) attached? Yes No

3. Nature of conveyance:
 Assignment Merger
 Security Agreement Change of Name
 Other Nunc Pro Tunc Assignment
Execution Date: 11-28-2000

4. Application number(s) or registration number(s):
A. Trademark Application No.(s)
B. Trademark Registration No.(s)
953082 1790440 0967685
0177147 1313391 1262262
Additional number(s) attached Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:
Name: David Van Kirk, Asst. City Manager
Internal Address: City of Vacaville

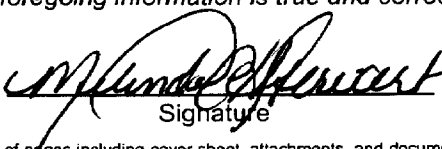
Street Address: 650 Merchant Street

City: Vacaville State: CA Zip: 95688

6. Total number of applications and registrations involved:
7. Total fee (37 CFR 3.41).....\$ 165.00
 Enclosed
 Authorized to be charged to deposit account
8. Deposit account number:

(Attach duplicate copy of this page if paying by deposit account)

DO NOT USE THIS SPACE

9. Statement and signature.
To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.
Melinda C. H. Stewart
Name of Person Signing

Signature
May 22, 2001
Date
Total number of pages including cover sheet, attachments, and document:

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patent & Trademarks, Box Assignments
Washington, D.C. 20231

TRADEMARK
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03-01-2001



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RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- New
- Resubmission (Non-Recordation)
Document ID #
- Correction of PTO Error
Reel # Frame #
- Corrective Document
Reel # Frame #

Conveyance Type

- Assignment
- License
- Security Agreement
- Nunc Pro Tunc Assignment
- Merger
- Change of Name
- Other

Effective Date
Month Day Year
11 28 2000

Conveying Party

Mark if additional names of conveying parties attached

Execution Date
Month Day Year

Name Nut Tree

11 28 2000

Formerly Nut Tree, a California Partnership; Nut Tree

- Individual
- General Partnership
- Limited Partnership
- Corporation
- Association
- Other
- Citizenship/State of Incorporation/Organization California

Receiving Party

Mark if additional names of receiving parties attached

Name Vacaville Redevelopment Agency

DBA/AKA/TA

Composed of

Address (line 1) 650 Merchant Street

Address (line 2)

Address (line 3) Vacaville California 95688

- Individual
- General Partnership
- Limited Partnership
- Corporation
- Association
- Other A redevelopment agency formed under the Community Redevelopment Law
- Citizenship/State of Incorporation/Organization California

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

FOR OFFICE USE ONLY

03/01/2001 DBY/NE 00000094 953082
01 FC:481 40.00 OP
02 FC:482 125.00 OP

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Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Correspondent Name and Address

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages

Enter the total number of pages of the attached conveyance document including any attachments.

#

Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

Registration Number(s)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="953082"/>	<input type="text" value="1790440"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="0967685"/>	<input type="text" value="0177147"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1313391"/>	<input type="text" value="1262262"/>	<input type="text"/>

Number of Properties

Enter the total number of properties involved.

#

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment:

Enclosed

Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:

Yes

No

Statement and Signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Melinda C. H. Stewart
Name of Person Signing


Signature

1-25-01
Date Signed

ASSIGNMENT OF TRADEMARKS

FOR GOOD AND VALUABLE CONSIDERATION, the receipt of which is hereby acknowledged, Nut Tree, a California Partnership, Nut Tree, a California Limited Partnership, and Nut Tree, all located at Nut Tree, California, 95696 ("Sellers") hereby transfers, grants and assigns to the Vacaville Redevelopment Agency, located at 650 Merchant Street, Vacaville, California ("the Agency"), all of Seller's rights, titles and interests whatsoever, throughout the world, in and to each of the below listed trademarks, all registrations and registration applications therefor and all of Seller's goodwill related thereto, to have and to hold the same, unto the Agency, its successors, assigns and nominees, for the full duration of all such rights, titles and interests, and any renewals and extensions thereof.

Assigned Trademarks

<u>Description of Mark</u>	<u>USPTO Registration No. or Application Serial No. (if applicable)</u>
Nut Tree (words)	953082
Drawing of a Tree (Design Only)	967685
Tree Design (design only)	1313391
Nut Tree (words)	1790440
The Nut Tree Vacaville California (words/design)	177147
Nut Tree (words)	1262622

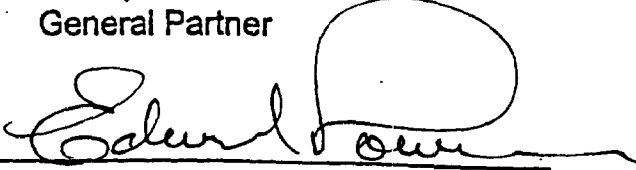
Dated: Nov 28, 2000

SELLERS:

NUT TREE,
A California limited partnership

By: 
Jeffrey N. Fairchild

Its: General Partner

By: 
Edwin I. Power

Its: General Partner

STATE OF CALIFORNIA)

COUNTY OF Solano)

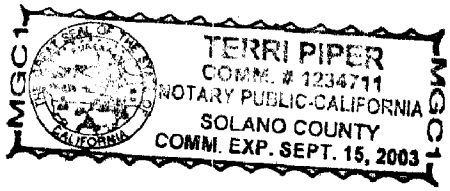
On 11-1-00 before me, Terri Piper
Date Name

personally appeared,
Jeffrey N. Fairchild & Edwin T. Power

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.

Terri Piper (SEAL)
Notary Public Signature



STATE OF CALIFORNIA)

COUNTY OF _____)

On _____ before me, _____
Date Name

personally appeared,

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.

Notary Public Signature (SEAL)