

FORM APPROVED COUNTY COUNSEL 8/26/15
 BY: GREGORY P. PRIAMOS DATE

Departmental Concurrence

**SUBMITTAL TO THE BOARD OF SUPERVISORS
 COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

638A



FROM: Don Kent, Treasurer-Tax Collector

SUBMITTAL DATE:
AUG 26 2015

SUBJECT: Recommendation for Distribution of Excess Proceeds for Tax Sale No. 197, Item 190. Last assessed to: Specialty Care Services, LLC. District 4 [\$15,124]. Fund 65595 Excess Proceeds from Tax Sale.

RECOMMENDED MOTION: That the Board of Supervisors:

1. Approve the claim from Specialty Care Services, LLC, last assessee for payment of excess proceeds resulting from the Tax Collector's public auction sale associated with parcel 661350011-3;
 (continued on page two)

BACKGROUND:

Summary

In accordance with Section 3691 et seq. of the California Revenue and Taxation Code, and with prior approval of the Board of Supervisors, The Tax Collector conducted the August 20, 2013 public auction sale. The deed conveying title to the purchasers at the auction was recorded October 2, 2013. Further, as required by Section 4676 of the California Revenue and Taxation Code, notice of the right to claim excess proceeds was given on October 30, 2013 to parties of interest as defined in Section 4675 of said code. Parties of interest have been determined by an examination of lot book reports as well as Assessor's and Recorder's records, and various research methods were used to obtain current mailing addresses for these parties of interest.
 (continued on page two)

[Signature]

Don Kent
 Treasurer-Tax Collector

| FINANCIAL DATA | Current Fiscal Year: | Next Fiscal Year: | Total Cost: | Ongoing Cost: | POLICY/CONSENT (per Exec. Office) |
|------------------------------------------------------------------|----------------------|-------------------|-------------|-------------------------------|-----------------------------------------------------------------------------|
| COST | \$ 15,124 | \$ 0 | \$ 15,124 | \$ 0 | Consent <input type="checkbox"/> Policy <input checked="" type="checkbox"/> |
| NET COUNTY COST | \$ 0 | \$ 0 | \$ 0 | \$ 0 | |
| SOURCE OF FUNDS: Fund 65595 Excess Proceeds from Tax Sale | | | | Budget Adjustment: N/A | |
| | | | | For Fiscal Year: 15/16 | |

C.E.O. RECOMMENDATION:

APPROVE

BY: *[Signature]* 10/26/15
 Samuel Wong

County Executive Office Signature

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Benoit, seconded by Supervisor Tavaglione and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Tavaglione, Washington, Benoit and Ashley
 Nays: None
 Absent: None
 Date: November 3, 2015
 xc: Treasurer

Kecia Harper-Ihem
 Clerk of the Board
 By: *[Signature]*
 Deputy

Prev. Agn. Ref.:

District: 4

Agenda Number:

9-22

- A-30
- Positions Added
- 4/5 Vote
- Change Order

SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

FORM 11: Recommendation for Distribution of Excess Proceeds for Tax Sale No. 197, Item 190. Last assessed to: Specialty Care Services, LLC. District 4 [\$15,124]. Fund 65595 Excess Proceeds from Tax Sale.

DATE: AUG 26 2015

PAGE: Page 2 of 2

RECOMMENDED MOTION:

2. Authorize and direct the Auditor-Controller to issue a warrant to Specialty Care Services, LLC in the amount of \$15,124.41, no sooner than ninety days from the date of this order, unless an appeal has been filed in Superior Court, pursuant to the California Revenue and Taxation Code Section 4675.

BACKGROUND:

Summary (continued)

The Treasurer-Tax Collector has received one claim for excess proceeds:

1. Claim from Specialty Care Services, LLC based on a Grant Deed recorded May 29, 2008 as Instrument No. 2008-0292257.

Pursuant to Section 4675 of the California Revenue and Taxation Code, it is the recommendation of this office that Specialty Care Services, LLC be awarded excess proceeds in the amount of \$15,124.41. Supporting documentation has been provided. The Tax Collector requests approval of the above recommended motion. Notice of this recommendation was sent to the claimant by certified mail.

Impact on Citizens and Businesses

Excess proceeds are being released to the last assessee of the property.

ATTACHMENTS (if needed, in this order):

A copy of the Excess Proceeds Claim form and supporting documentation are attached.

CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX-DEFAULTED PROPERTY
(SEE REVERSE SIDE FOR FURTHER INSTRUCTIONS)

To: Don Kent, Treasurer-Tax Collector

Re: Claim for Excess Proceeds

TC 197 Item 190 Assessment No.: 661350011-3

Assessee: SPECIALTY CARE SERVICES

Situs:

Date Sold: August 20, 2013

Date Deed to Purchaser Recorded: October 2, 2013

Final Date to Submit Claim: October 2, 2014

RECEIVED
2014 SEP 19 PM 4:45
RIVERSIDE COUNTY
TREASURER-TAX COLLECTOR

I/We, pursuant to Revenue and Taxation Code Section 4675, hereby claim excess proceeds in the amount of \$ all proceeds from the sale of the above mentioned real property. I/We were the lienholder(s), property owner(s) [check in one box] at the time of the sale of the property as is evidenced by Riverside County Recorder's Document No. 2008-0292257 recorded on 5/29/2008. A copy of this document is attached here to. I/We are the rightful claimants by virtue of the attached assignment of interest. I/We have listed below and attached hereto each item of documentation supporting the claim submitted.

NOTE: YOUR CLAIM WILL NOT BE CONSIDERED UNLESS THE DOCUMENTATION IS ATTACHED.

Grant Deed.

If the property is held in Joint Tenancy, the taxsale process has severed this Joint Tenancy, and all Joint Tenants will have to sign the claim unless the claimant submits proof that he or she is entitled to the full amount of the claim, the claimant may only receive his or her respective portion of the claim.

I/We affirm under penalty of perjury that the foregoing is true and correct.

Executed this 16 day of Sept, 2014 at Wausau WI 54984
County, State

Sharon Marek member LLC
Signature of Claimant
Sharon Marek member LLC
Specialty Care Services LLC
Print Name
830 High St
Street Address
Wild Rose WI 54984
City, State, Zip
414-430-3905
Phone Number

Signature of Claimant

Print Name

Street Address

City, State, Zip

Phone Number

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL DOCUMENT AND TAX STATEMENT TO:

NAME Specialty Care Services, LLC

STREET ADDRESS 12755 West Ohio Ct.

CITY, STATE & ZIP CODE New Berlin, Wisconsin 53151

TITLE ORDER NO. _____

ESCROW NO. _____

DOC # 2008-0292257

05/29/2008 08:00A Fee:12.00

Page 1 of 2

Recorded in Official Records
County of Riverside

Larry W. Ward
Assessor, County Clerk & Recorder



12

| S | R | U | PAGE | SIZE | DA | MISC | LONG | RFD | COPY |
|-------|---|---|------|------|------|------|------|------|------|
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| M | A | L | 465 | 426 | PCOR | NCOR | SMF | NCHG | EXAM |
| DIT-0 | | | | | | T: | CTY | UNI | 809 |

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

C
809

GRANT DEED

TRA: _____

APN: _____

The undersigned grantor(s) declare(s)

DOCUMENTARY TRANSFER TAX \$ _____

- computed on full value of property conveyed, or
- computed on full value less liens and encumbrances remaining at time of sale.
- Unincorporated Area City of _____

FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, I (We) Dorama, LLC

hereby remise, release and grant to Specialty Care Services, LLC
(NAME OF GRANTOR(S))

the following described real property in the City of Desert Hot Springs, County of Riverside,
State of California
(NAME OF GRANTEE(S))

(Insert Legal Description)
see attached:

DORAMA, LLC

DATED: 05/28/2008

James Marek
managing member

STATE OF CALIFORNIA
COUNTY OF RIVERSIDE

On May 29, 2008 before me, Elizabeth Ward, Notary Public personally appeared
(here insert name and title of the officer)

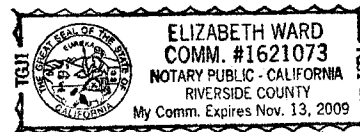
James Marek

who 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Elizabeth Ward (SEAL)



LEGAL DESCRIPTION

Lot 11 of Tract no. 30615-1, in the City of Desert Hot Springs, County of Riverside, State of California, as shown by map of file in Book 358, Pages 80 though 84, records of Riverside County, California;

Excepting therefrom One-Sixteenth of all coal, oil, has and other mineral deposits in said land, as reserved in Patent from the State of California, recorded December 10, 1931 in Book 60, Page 172 of Official Records of riverside County, California;

Also excepting therefrom the remaining 15/16th interest in and all of the oil, gas, casinghead gas, and other hydrocarbons and all other minerals, chemicals and steam in and underlying or produced or to be produced from said property, without the right of surface entry as reserved to Raymond J. Ryan and Helen Ryan, husband and wife, in Deed recorded August 1, 1968 as Instrument No. 74298 of Official Records of Riverside County, California.



2008-0292257
05/29/2008 08:00A
2 of 2

Wisconsin Department of Financial Institutions

Strengthening Wisconsin's Financial Future

Search for:

specialty care services

Search Records

[Search](#)
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[Name Availability](#)
Corporate RecordsResult of lookup for **S054259** (at 8/21/2015 1:11 PM)**SPECIALTY CARE SERVICES (SCS), LLC**

You can: [File an Annual Report](#) - [Request a Certificate of Status](#) - [File a Registered Agent/Office Update Form](#)

Vital Statistics

Entity ID S054259

Registered Effective Date 03/11/1999

Period of Existence PER

Status Restored to Good Standing [Request a Certificate of Status](#)

Status Date 02/06/2013

Entity Type Domestic Limited Liability Company

Annual Report Requirements Limited Liability Companies are required to file an Annual Report under s. 183.0120, WI Statutes.

Addresses

Registered Agent Office SHARON M MAREK
220 SAINT MARIE ST
PO BOX 1028
WAUTOMA , WI 54982-1028

[File a Registered Agent/Office Update Form](#)

Principal Office 220 SAINT MARIE ST
PO BOX 1028
WAUTOMA , WI 54982-1028
UNITED STATES OF AMERICA

Historical Information**Annual Reports**

| Year | Reel | Image | Filed By | Stored On |
|------|------|-------|----------|-----------|
| 2015 | 000 | 0000 | online | database |
| 2014 | 000 | 0000 | online | database |
| 2013 | 000 | 0000 | online | database |
| 2011 | 000 | 0000 | online | database |

| | | | | |
|------|-----|------|-------|-------|
| 2010 | 111 | 1111 | paper | image |
| 2005 | 111 | 1111 | paper | image |
| 2004 | 111 | 1111 | paper | image |

[File an Annual Report - Order a Document Copy](#)

**Certificates of
Newly-elected
Officers/Directors**

None

Old Names

None

Chronology

| Effective Date | Transaction | Filed Date | Description |
|----------------|--------------------------------------|------------|---------------------|
| 03/11/1999 | Organized | 03/16/1999 | |
| 01/01/2007 | Delinquent | 01/01/2007 | ***RECORD IMAGED*** |
| 01/11/2010 | Notice of Administrative Dissolution | 01/11/2010 | RTND UNDELIVERABLE |
| 03/23/2010 | Notice of Administrative Dissolution | 03/23/2010 | |
| 05/25/2010 | Administrative Dissolution | 05/25/2010 | |
| 10/01/2010 | Restored to Good Standing | 10/04/2010 | |
| 10/01/2010 | Certificate of Reinstatement | 10/04/2010 | |
| 10/01/2010 | Change of Registered Agent | 10/04/2010 | FM 516 2010 |
| 03/08/2011 | Change of Registered Agent | 03/08/2011 | FM516-E-Form |
| 01/01/2013 | Delinquent | 01/01/2013 | |
| 02/06/2013 | Restored to Good Standing | 02/06/2013 | E-Form |
| 01/27/2015 | Change of Registered Agent | 01/27/2015 | FM516-E-Form |

[Order a Document Copy](#)