

FILED FOR RECORD AT THE
REQUEST OF/RETURN TO:
Craig E. Cammock
Law Office of Craig E. Cammock
P.O. Box 836 / 415 Pine Street
Mount Vernon, WA. 98273



200104240116
, Skagit County Auditor
4/24/2001 Page 1 of 2 1:56:22PM

APPOINTMENT OF SUCCESSOR TRUSTEE

Grantor (s) KEITH S. JOHNSON & ALISON R. JOHNSON, husband and wife
Grantee (s) CAMMOCK, CRAIG E., ATTORNEY AT LAW
Additional Grantor(s) on page(s)
Additional Grantee(s) on page(s)
Abbreviated Legal: Lot 41, WIDNOR DRIVE
Additional Legal on page(s)
Assessor's Tax Parcel No's: 3771-000-041-0002 / P54922

KNOW ALL MEN BY THESE PRESENTS: **SUSAN TINGELSTAD**, is the Grantor, **LAND TITLE COMPANY OF SKAGIT COUNTY**, is the Trustee and **KEITH S. JOHNSON & ALISON R. JOHNSON**, husband and wife, are the Beneficiaries under that certain Deed of Trust dated September 3, 1999, and recorded on September 10, 1999, in records of Skagit County, Washington, under Skagit County Auditor's File No. 199909100062.

The undersigned, who is the beneficiary under said Deed of Trust, desires to appoint a new Trustee in the place and stead of the Trustee named above;

NOW, THEREFORE, in view of the premises, the undersigned hereby appoints **CRAIG E. CAMMOCK**, Attorney at Law, 415 Pine Street, Mount Vernon, WA 98273, as Successor Trustee under said Deed of Trust, and said Successor Trustee shall have all the powers of said original Trustee, effective forthwith.

IN WITNESS WHEREOF, the undersigned beneficiaries has hereunto set his/her hand.
If the undersigned is a corporation, it has caused its corporate name to be signed and affixed hereunto by its duly authorized officers.

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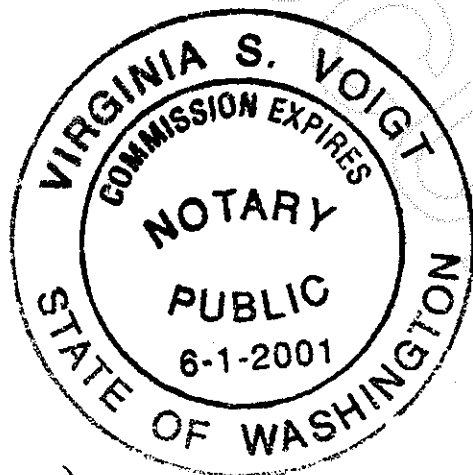
DATED: April 20, 2001.

~~KEITH S. JOHNSON~~

ALISON R. JOHNSON

State of Washington)
) ss
County of Skagit)

I certify that I know or have satisfactory evidence that KEITH S. JOHNSON is the person who appeared before me and said person acknowledged that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in the instrument.



Dated:

(Signature)

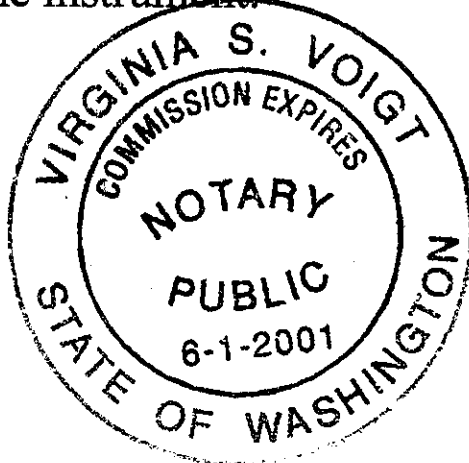
NOTARY PUBLIC

Print Name of Notary

My appointment expires: 6-1-2001

State of Washington)
County of Skagit) ss

I certify that I know or have satisfactory evidence that ALISON R. JOHNSON is the person who appeared before me and said person acknowledged that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in the instrument.



Dated:_____

(Signature)

NOTARY PUBLIC

Print Name of Notary

My appointment expires: 6-1-2007

