

WHEN RECORDED,
RETURN TO:

Washington Federal Savings
Mount Vernon Office
P.O. Box 639
Mount Vernon, WA 98273
Attn: Al Collins



200205290065
Skagit County Auditor

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Date May 13th, 2002

Loan No. 013 201 247179-5

ISLAND TITLE CO.

B18416

NOTICE OF MODIFICATION OF DEED OF TRUST

NOTICE TO ALL PERSONS is given that Washington Federal Savings,
as the Beneficiary/(Grantee) of that Deed of Trust dated August 1st, 2001,
recorded under Auditor's File No. 200108030122,
in the Records of Skagit County, State of Washington
has, this date, modified the terms of the Note secured by the Deed of Trust ("the Loan Contract and
Security Instrument"), as approved by
JOSEPH W ENGBERG AND KHIRSTIE A ENGBERG, HUSBAND AND WIFE
, Grantor (or Successor Grantor)
under the Security Instrument as follows:

Check
Appropriate
Box(es) **IMPORTANT:** Any numbered paragraph, which is highlighted by the mark of an
"X" in the box opposite it and whose blank lines or spaces are filled in, is part of
this notice. Any other numbered paragraph not so highlighted, is not part of this
notice.

- 1. The Maturity Date of the Loan Contract and Security Instrument has been changed
from April 1st, 2032 to August 1st, 2032.
- 2. The Loan Contract and Security Instrument has also been modified in a manner other than
change in the Maturity Date.

The purpose of this document is to provide record notice, when required, of a modification in the terms
of the loan contract and security instrument. It is not intended to nor shall it be deemed to alter in any
manner the actual terms of any loan modification agreement between the grantor of the security
instrument (or the successor of grantor) and
WASHINGTON FEDERAL SAVINGS

as beneficiary. Notice is given to all persons that, except for the terms of any loan modification
agreement, the terms of the original loan contract and security instrument shall in all other respects
remain in full force and effect.

WASHINGTON FEDERAL SAVINGS

by: Allen L. Collins
ALLEN L COLLINS
Title: Assistant Vice President And
Manager

Grantor(s)
Joseph W Engberg
JOSEPH W ENGBERG
Kirstie A Engberg
KHIRSTIE A ENGBERG

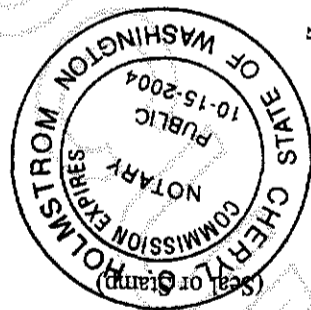
(Over for notary acknowledgments)

My commission expires _____
 residing at _____
 Notary Public in and for the State of _____
 (Signature) _____

Dated: _____
 (Name of the Party on Behalf of Whom the Instrument was Executed) _____
 of _____
 (Type of Authority, e.g., Officer, Trustee) _____

is/are the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument, on oath stated that (he/she/they) was/were authorized to execute the instrument and acknowledged it as the _____
 [Name(s) of person(s)] _____

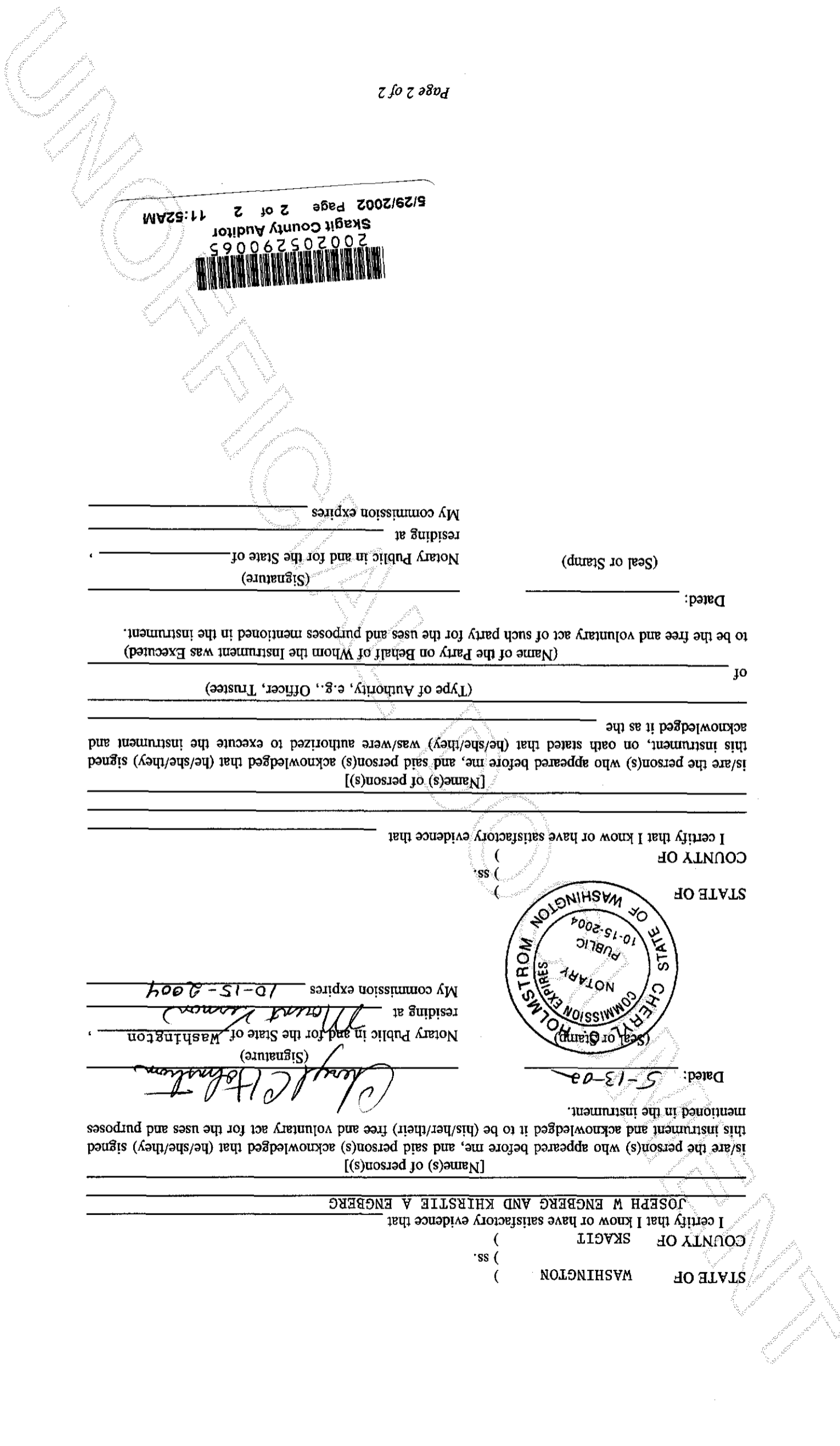
I certify that I know or have satisfactory evidence that _____
 COUNTY OF _____
 STATE OF _____



Dated: 5-13-03
 My commission expires 10-15-2004
 residing at _____
 Notary Public in and for the State of Washington
 (Signature) Cheryl Holmstrom

is/are the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument and acknowledged it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in the instrument.
 [Name(s) of person(s)] _____
 I certify that I know or have satisfactory evidence that _____
 COUNTY OF SKAGIT
 STATE OF WASHINGTON

JOSEPH W ENGBERG AND KIRSTIE A ENGBERG



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