11:28AM 9/4/2002 Page

My appointment expires 9/6/2005

Form No. LT-16 Full (4/99)

WHEN RECORDED RETURN TO

Name SKAGIT STATE BANK Address POST OFFICE BOX 285 City, State, Zip BURLINGTON, WA 98233

My appointment expires:



Land Title Company	
FILED FOR RECORD AT REQUEST OF	
LAND TITLE COMPANY	
Full Reconveyance P-96057	
The undersigned as trustee under that certain I	Deed of Trust dated March 2 2001
in which BRUCE D JOHNSON AND SHAUNA	L JOHNSON is granter
andSKAGIT STATE BANK	is is
of	Auditor's File No200103050219, records fon, having received from the beneficiary under said Deed at the obligations secured by the Deed of Trust have been nty, to the person(s) entitled thereto all of the right, to the property described in said Deed of Trust, situated in ton, as follows:
	MCMILLEN DIV. 3", as per Plat Plats, pages 209 through 211, git County, Washington.
DatedSeptember 4 2002	LAND TITLE COMPANY OF SKAGIT COUNTY (Trustee) By BILL RONHAAMeme-Title) MANAGER
STATE OF WASHINGTON } ss.	STATE OF WASHINGTON
COUNTY OF	COUNTY OF Skagit
On this day personally appeared before me	On this4th day of
to me known to be the individual described in and who executed the within and foregoing instrument, and acknowledged that	the authorized signatory ofANDTTTLE_COMPANY, the corporation that executed the foregoing instrument, and acknowledged said instrument to be the free and voluntary act and deed of said corporation, for the uses and purposes therein mentioned, and on oath stated that he is authorized to execute the said instrument.
for the uses and purposes therein mentioned. SHARON R. ANTHONY GIVEN under my a STATE OF WASHINGTON MOTARY PUBLIC	Witness my hand and official seal hereto affixed the day and year first above written
Notary Public in and for the State of Washington, residing at	SHARON R ANTHONY Notary Public in and for the State of Washington, residing WOUNT VERNON