



200212190131
Skagit County Auditor

12/19/2002 Page 1 of 5 11:37AM

When Recorded Return to:
KeyBank National Association
P.O. Box 16430
Boise, ID 83715
(360) 755-9045

MODIFICATION AND EXTENSION OF PROMISSORY NOTE/DEED OF TRUST

GRANTOR(S): STEVEN C. WIRTH

UNMARRIED

GRANTEE ("Lender"): KeyBank National Association
P.O. Box 16430
Boise, ID 83715

TRUSTEE: KEYBANK USA NATIONAL ASSOCIATION
431 E PARKCENTER BLVD BOISE, ID 83706

ABBREVIATED LEGAL DESCRIPTION:
TRACT 2 SP 34082 A'S NO 8301250001 VOL 6 PG 44

(Additional legal description on page 2.)

ASSESSOR'S TAX PARCEL OR ACCOUNT NUMBER: 3867-000-073-1808
REFERENCE NUMBERS OF DOCUMENTS MODIFIED AND EXTENDED: 200102120040

BORROWER	
STEVEN C. WIRTH	
ADDRESS	
1034 S ANACORTES ST BURLINGTON, WA 98233	
TELEPHONE NO.	IDENTIFICATION NO.

THIS MODIFICATION AND EXTENSION OF PROMISSORY NOTE/DEED OF TRUST, dated the 10th day of December 2002, is executed by and between the parties identified above and KeyBank National Association
4910 Tiedeman Road, Suite B, Brooklyn, Ohio 44144
("Lender").

A. On February 03, 2001, Lender made a loan ("Loan") to Borrower evidenced by Borrower's promissory note or agreement ("Note") payable to Lender in the original principal amount of fifty thousand and 00/100 Dollars (\$ 50,000.00), which Note is secured by a deed of trust ("Deed of Trust") executed by Grantor for the benefit of Lender and encumbering the real property described on Schedule A below ("Property") and recorded on February 12, 2001 in Book _____ at Page _____ in the Auditor's Office of SKAGIT County, Washington. The Note and Deed of Trust and any other related documents are hereafter cumulatively referred to as the "Loan Documents".

B. The Note and Deed of Trust are hereby modified as follows:

1. TERMS OF REPAYMENT.

☐ The maturity date of the Note is extended to _____, at which time all outstanding sums due to Lender under the Note shall be paid in full, and the Deed of Trust is modified accordingly. The parties acknowledge and agree that, as of _____, the unpaid principal balance due under the Note was \$ _____, and the accrued and unpaid interest on that date was \$ _____. The new repayment terms are as follows:

2. ADDITIONAL MODIFICATIONS.

☒ The Deed of Trust and Note are further modified as follows:

The original amount of the Note, which is secured by the Deed of Trust referenced above, and the original principal amount of such Deed of Trust in the amount of fifty thousand and 00/100 dollars (\$50,000.00) is hereby increased to seventy four thousand and 00/100 dollars (\$74,000.00), an increase of twenty four thousand and 00/100 dollars (\$24,000.00).

C. Additional Representations, Warranties and Agreements.

Grantor represents and warrants that Grantor owns the property free and clear of any liens or encumbrances other than the liens described on Schedule B below. Except as expressly modified herein, all terms and conditions of the Loan Documents shall remain in full force and effect. The parties hereby adopt, ratify and confirm these terms and conditions as modified. Borrower and Grantor agree to execute any additional documents which may be required by Lender to carry out the intention of this Agreement. As of the date of this Agreement, there are no claims, defenses, setoffs or counterclaims of any nature which may be asserted against Lender by any of the undersigned.

SCHEDULE A

The following described real property located in the County of SKAGIT, State of Washington

TRACT 2 OF SHORT PLAT NO. 34-82, APPROVED JANUARY 24, 1983 AND RECORDED JANUARY 25, 1983, UNDER AUDITOR'S FILE NO. 8301250001, IN VOLUME 6 OF SHORT PLATS, PAGE 44, RECORDS OF SKAGIT COUNTY, WASHINGTON, BEING LOCATED IN THE WEST THREE QUARTER OF THE WEST HALF OF TRACT 75, OF THE PLAT OF THE BURLINGTON ACREAGE PROPERTY, ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 4 OF PLATS, PAGE 49, RECORDS OF SKAGIT COUNTY, WASHINGTON. SITUATE IN THE COUNTY SKAGIT, STATE OF WASHINGTON. ABBRV LEGAL TRACT 2 SP 34082 A'S NO 8301250001 VOL 6 PG 44 FIRST AMERICAN TITLE ORDER NO:3880999

SCHEDULE B



200212190131
Skagit County Auditor

12/19/2002 Page 2 of 5 5 11:37AM

GRANTOR: STEVEN C. WIRTH

Steven C. Wirth
STEVEN C. WIRTH

GRANTOR:

GRANTOR:

GRANTOR:

GRANTOR:

GRANTOR:

GRANTOR:

GRANTOR:



BORROWER: STEVEN C. WIRTH

Steven C. Wirth
STEVEN C. WIRTH

BORROWER:

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LENDER:
KeyBank National Association



200212190131
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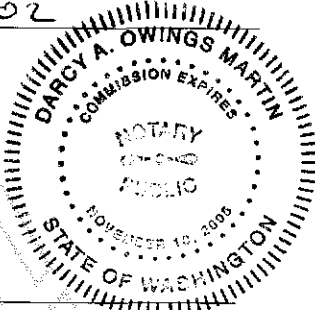
12/19/2002 Page 4 of 5 5:11:37AM

State of Washington
County of Skagit

I certify that I know or have satisfactory evidence that Steven C. Wirth

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: 12-10-02



Notary Public (Print Name) Darcy A Owings Martin

Title Notary

My appointment expires: 11-10-05

State of Washington
County of _____

I certify that I know or have satisfactory evidence that _____

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: _____

Notary Public (Print Name) _____

Title _____

My appointment expires: _____

State of Washington
County of _____

I certify that I know or have satisfactory evidence that _____

is that person who appeared before me, and said person acknowledged that he/she signed this instrument, on oath stated that he/she was authorized to execute this instrument and acknowledged it as the _____ to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: _____

Notary Public (Print Name) _____

Title _____

My appointment expires: _____

(Seal or Stamp)

State of Washington
County of _____

I certify that I know or have satisfactory evidence that _____

is that person who appeared before me, and said person acknowledged that he/she signed this instrument, on oath stated that he/she was authorized to execute this instrument and acknowledged it as the _____ to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: _____

Notary Public (Print Name) _____

Title _____

My appointment expires: _____

(Seal or Stamp)



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ACAPS # 023361220080C; ALS # 473101396339

12/19/2002 Page 5 of 5 5 11:37AM