



200310130070

Skagit County Auditor

10/13/2003 Page 1 of 5 10:01AM

When Recorded Return to:
KeyBank National Association
P.O. Box 16430
Boise, ID 83715
(360) 378-2111

MODIFICATION AND EXTENSION OF PROMISSORY NOTE/DEED OF TRUST

GRANTOR(S): JOHN W. FABIANEK HUSBAND
SHERYL FABIANEK WIFE

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:
TR 47, SKYLINE NO. 7, V9/P70

(Additional legal description on page 2.)

ASSESSOR'S TAX PARCEL OR ACCOUNT NUMBER: 38230000470004

REFERENCE NUMBERS OF DOCUMENTS MODIFIED AND EXTENDED: 200202190129

BORROWER	
JOHN W. FABIANEK SHERYL FABIANEK	
ADDRESS	
1907 BAY PL ANACORTES, WA 98221	
TELEPHONE NO.	IDENTIFICATION NO.

THIS MODIFICATION AND EXTENSION OF PROMISSORY NOTE/DEED OF TRUST, dated the 3rd day of October 2003, 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 09, 2002, 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 eighty thousand and 00/100 Dollars (\$ 80,000.00), 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 19, 2002 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 eighty thousand and 00/100 dollars (\$80,000.00) is hereby increased to two hundred eight thousand and 00/100 dollars (\$208,000.00), an increase of one hundred twenty eight thousand and 00/100 dollars (\$128,000.00).

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

ALL THAT PARCEL OF LAND IN CITY OF ANACORTES, SKAGIT COUNTY, STATE OF WASHINGTON, AS MORE FULLY DESCRIBED IN DEED DOC # 9609060087, ID# 38230000470004, BEING KNOWN AND DESIGNATED AS TRACT 47, SKYLINE NO. 7, VOL. 9, PAGE 70. ABBRV. TR 47, SKYLINE NO. 7, V9/P70

SCHEDULE B



200310130070
Skagit County Auditor

10/13/2003 Page 2 of 5 5:10:01AM

JW
SF

GRANTOR: JOHN W. FABIANEK

John W. Fabianek
JOHN W. FABIANEK

GRANTOR: SHERYL FABIANEK

Sheryl Fabianek
SHERYL FABIANEK

GRANTOR:

GRANTOR:

GRANTOR:

GRANTOR:

GRANTOR:

GRANTOR:



200310130070

Skagit County Auditor

10/13/2003 Page 3 of 5 10:01AM

BORROWER: JOHN W. FABIANEK

John W. Fabianek

JOHN W. FABIANEK

BORROWER: SHERYL FABIANEK

Sheryl Fabianek

SHERYL FABIANEK

BORROWER:

BORROWER:

BORROWER:

BORROWER:

BORROWER:

BORROWER:

LENDER:

KeyBank National Association



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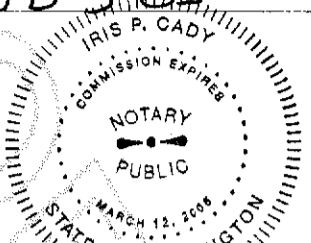
State of Washington San Juan
County of San Juan

I certify that I know or have satisfactory evidence that John W Fabianek

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: 10-3-03

Iris P Cady
Notary Public (Print Name) IRIS P CADY
Title Notary
My appointment expires: 3-12-2006



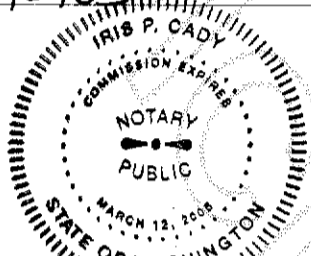
State of Washington San Juan
County of San Juan

I certify that I know or have satisfactory evidence that Sheryl Fabianek

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: 10/3/03

Iris P Cady
Notary Public (Print Name) IRIS P CADY
Title Notary
My appointment expires: 3-12-2006



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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10/13/2003 Page 5 of 5 5:10:01AM

ACAPS # 032591641580C; ALS # 473101618096