

	12/28/2004 Page 1 of 1 8:38AM
WHEN RECORDED RETURN TO	(
Name State Bank of Concrete	
	•
Address P.O. Box 426	
City, State, ZiConcrète Wa 98237	
Land Title Company FILED FOR RECORD AT REQUEST-OF	
THEED TOK RECORD AT ALLQUEST GI	
LAND TITLE COMPANY	
Full Re	econveyance 99175 114315 TISFACTION OF NOTE
The undersigned as trustee under that certain	D = = == 1 2001
in which STANLEY C. MCMAHAN AND CHERY	(L.MCMAHAN,asjointdebtorsis grantor
and STATE BANK OF CONCRETE beneficiary, recorded on 12-14-2001, a of Skagit County, Washing of Trust a written request to reconvey, reciting th fully satisfied, does hereby reconvey, without warr	is as Auditor's File No. 200112140072, records gion, having received from the beneficiary under said Deed at the obligations secured by the Deed of Trust have been anty, to the person(s) entitled thereto all of the right, to the property described in said Deed of Trust, situated in
	ACRES, as per plat recorded in and 17, records of Skagit County
DatedDecember282004	LAND TITLE COMPANY OF SKAGIT COUNTY  Trustee)  By  BILL RONHAMeme-Title) MANAGER
STATE OF WASHINGTON COUNTY OF	STATE OF WASHINGTON Skagit
On this day personally appeared before me	On this28thday ofDecember2004
to me known to be the individual described in and who executed the within and foregoing instrument, and acknowledged that	Bill Ronhaar to me known to be the authorized signatory of AND TITLE 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.
GIVEN under my hand and official sea this my of my commission Expires 9-6-2005	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 at MOUNT VERNON

Notary Public in and for the State of Washington, residing at ..... My appointment expires: .....

My appointment expires: ....9-6-2005.... Form No. LT-16 Full (1/01)