

When Recorded Return To:

Washington Mutual
PO BOX 45179
JACKSONVILLE, FL 32232-5179

200502220085
Skagit County Auditor
2/22/2005 Page 1 of 1 10:08AM

APPOINTMENT OF SUCCESSOR TRUSTEE

WASHINGTON MUTUAL - CLIENT 908 # 5302387336 "DUVALL" Lender ID: N61/602/601191358 Skagit, Washington PIF:
01/28/2005
MERS #: 100013801079421537 VRU #: 1-888-679-6377

WHEREAS, the undersigned is the present Beneficiary under the Deed of Trust Described as follows:

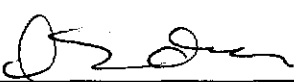
Original Trustor : ROSE M DUVALL
Original Beneficiary : MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC AS NOMINEE FOR
GREENPOINT MORTGAGE FUNDING, INC.
Dated: 03/05/2003 Recorded: 03/18/2003 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:
200303180017 In the County of Skagit State of Washington

Property Address : 3340 EAST DIVISION STREE, MOUNT VERNON, WA 98274

AND WHEREAS, the undersigned, who is the present Beneficiary under said Deed of Trust, desires to appoint a
successor Trustee under said Deed of Trust in the place and stead of present Trustee thereunder;

Now therefore, the undersigned hereby appoints WASHINGTON RECONVEYANCE COMPANY whose address is
C/O WASHINGTON MUTUAL, PO BOX 45179, JACKSONVILLE, FL 32232-5179 as Successor Trustee under said
Deed of Trust, to have all the powers of said original Trustee, effective immediately.

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.
On February 16th, 2005

By: 
D SAUNDERS, Vice-President

STATE OF Florida
COUNTY OF Duval

Before me, the undersigned, a Notary Public, on this day personally appeared D SAUNDERS, Vice-President,
personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s)
is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in
his/her/their authorized capacity, and that by his/her/their signature on the instrument the person(s), or the entity
upon behalf of which the person(s) acted, executed the instrument. Given under my hand and seal of office, this day
February 16th, 2005.

WITNESS my hand and official seal,


Notary Expires: / /



(This area for notarial seal)