

When Recorded Return To:

Washington Mutual
PO BOX 45179
JACKSONVILLE, FL 32232-5179



200505310046
Skagit County Auditor
5/31/2005 Page 1 of 1 10:11AM



Deed of Reconveyance

WASHINGTON MUTUAL - CLIENT 908 #:0607540127 "SHULTZ" Lender ID:260/021/932194389 Skagit, Washington PIF:
05/06/2005
MERS #: 100063200000113223 VRU #: 1-888-679-6377

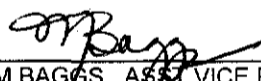
WHEREAS WASHINGTON RECONVEYANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trustor: JOHN R SHULTZ AND CONNIE M SHULTZ
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR MANN FINANCIAL INC.
Original Trustee: FIRST AMERICAN TITLE COMPANY
Dated: 04/28/2003 Recorded: 05/02/2003 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200305020008 In the Records of the County Recorder of Skagit, State of Washington.
Property Address: 625 HONEYSUCKLE DR, MOUNT VERNON, WA 98273

AND WHEREAS, the above said Deed of Trust has been paid in full;

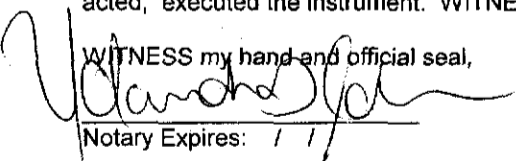
NOW THEREFORE, the present Trustee having received from the present owner of the beneficial interest under said Deed of Trust and the obligations secured thereby a written request to reconvey by reason of the obligations secured by said Deed of Trust,
DOES HEREBY RECONVEY, without warranty, to the person or persons legally entitled thereto, the estate, title and interest now held by it under said Deed of Trust, describing the land therein as more fully described in said Deed of Trust.


By WASHINGTON RECONVEYANCE COMPANY as Trustee
On May 20th, 2005


M BAGGS, ASST VICE PRESIDENT

STATE OF Florida
COUNTY OF Duval

On May 20th, 2005, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared M BAGGS, ASST VICE PRESIDENT, personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.

WITNESS my hand and official seal,

Notary Expires: / /


Yolandra D. Johnson
Commission # DD401903
Expires March 1, 2009
Bonded Troy Pain - Insurance, Inc. 800-385-7019

(This area for notarial seal)