RECORDING REQUESTED BY

T.D. SERVICE COMPANY

and when recorded mail to

T D SERVICE COMPANY

Skagit County Auditor

5/25/2006 Page

2 11:12AM

1820 E. FIRST ST., SUITE 210
P.O. BOX 11988
SANTA ANA, CA 92711-1988

"LSI TITLE, FRES DIVISION"

Space above this line for recorder's use ____

CHICAGO TITLE ICG39117

APPOINTMENT OF SUCCESSOR TRUSTEE

T.S. No: L337829 WA

Unit Code: L Loan No: 65065012749290001/STREGE

AP #1: P103775

Property Address: 16422 DIKE RD., MOUNT VERNON, WA 98273-9570

NOTICE IS HEREBY GIVEN: That the beneficiary desires to substitute a new Trustee under the Deed of Trust hereinafter referred to in the place and stead of the present Trustee thereunder, in the manner provided for in said Deed of Trust and does hereby substitute T.D. ESCROW SERVICES INC., DBA T.D. SERVICE COMPANY, 1820 E. First St., Suite 210, P.O. Box 11988, Santa Ana, CA 92705

CHICAGO TITLE INSURANCE COMPANY was the original Trustee in the Deed of Trust hereinafter described:

Trustor: ROBERT E. STREGE

Original Beneficiary:

WELLS FARGO BANK, N.A.

Dated October 24, 2003, Recorded November 25, 2003 as Instr. No. 2003 1250081 in Book --- Page --- of Official Records in the office of the Recorder of SKAGIT County; WASHINGTON .

Notice and other personal service may be served on the Trustee at: T.D. ESCROW SERVICES INC., DBA T.D. SERVICE COMPANY 520 E. Denny Way Seattle, WA 98122-2100 (800) 843-0260 Dated 05/23/06

WELLS FARGO BANK, N.A. BY T.D. SERVICE COMPANY, AS ATTORNEY-IN-FACT

CRYSTAL ESRINOZA

ASSISTANT SECRETARY

Page 2 T.S. No: L337829 WA

Unit Code: L

Loan No: 65065012749290001/STREGE

STATE OF CALIFORNIA COUNTY OF ORANGE

)SS

On 05/23/06 before me, LAURA MAIB, a Notary Public, personally appeared CRYSTAL ESPINOZA, ASSISTANT SECRETARY 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(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal.

Signature .

(Seal)





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