

When Recorded Return To:

Washington Mutual
PO BOX 45179
JACKSONVILLE, FL 32232-5179



200608170032
Skagit County Auditor

8/17/2006 Page 1 of 1 9:48AM



APPOINTMENT OF SUCCESSOR TRUSTEE

WASHINGTON MUTUAL - CLIENT 908 #0609947072 "MORGAN" Lender ID:F27/037/1686533680 Skagit, Washington PIF:
08/09/2006
MERS #: 1002050-1000003867-9 VRU #: 1-888-679-6377

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

Original Trustor : AARON P MORGAN, A SINGLE MAN
Original Beneficiary : MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS NOMINEE FOR GOLF SAVINGS BANK
Dated: 01/21/2003 Recorded: 01/31/2003 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200301310028 In the County of Skagit State of Washington

Property Address : 4319 TYLER WAY, ANACORTES, WA 98221

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.

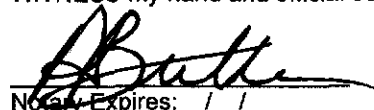
MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR GOLF SAVINGS BANK
On August 12th, 2006

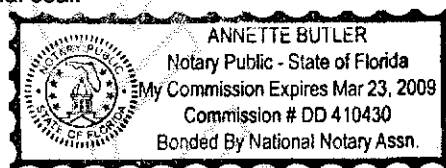
By: 
Jocelyn Tate, Lien Release Assistant Secretary

STATE OF Florida
COUNTY OF Duval

On August 12th, 2006, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared Jocelyn Tate, Lien Release Assistant Secretary, 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: / /



(This area for notarial seal)