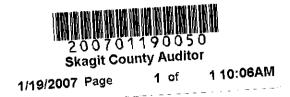
AFTER RECORDING MAIL TO: Reconveyance Specialists 13200 NE 20th Street, Suite 2 Bellevue, WA 98005-2034



APPOINTMENT OF SUCCESSOR TRUSTEE

Escrow No.

Reference Numbers of Related Documents: Deed of Trust No. 200402060111
Grantor(s): STEVEN W. LUSA AND SUSAN J. LUSA, HUSBAND AND WIFE
Beneficiary: ARVID MOSTAD AND SHIRLEE MOSTAD, HUSBAND AND WIFE
Assessor's Property Tax Parcel/Account Number(s): P73541, P73549, P73546, P20424
Abbrev. Legal: PTN BLKS 36,37 & 39, PLAT OF THE TOWNSITE OF GIBRALTER

KNOW ALL MEN BY THESE PRESENTS:

STEVEN W. LUSA AND SUSAN J. LUSA, HUSBAND AND WIFE is the Grantor, and FIRST AMERICAN TITLE COMPANY is the Trustee, and ARVID MOSTAD AND SHIRLEE MOSTAD, HUSBAND AND WIFE is the Beneficiary, under that certain Deed of Trust dated JANUARY 28, 2004, and recorded on FEBRUARY 6, 2004, records of SKAGIT County, Washington, under Auditor's File No. 200402060111.

Dated: DECEMBER 7, 2006

ARVID MOSTAD AND SHIRLEE MOSTAD, the undersigned, who is the present beneficiary under said Deed of Trust, (if by assignment, merger or other subsequent recording, the applicable classification and reference number recorded is N/A) desires to appoint a new Trustee in the place and stead of the Trustee above:

NOW, THEREFORE, in view of the premises, the undersigned hereby appoints Reconveyance Specialists whose address is 13200 NE 20th Street, Suite 2, Bellevue, WA 98005-2034 as successor Trustee under said Deed of Trust, they to have all the powers of said original Trustee, effective forthwith.

IN WITNESS WHEREOF, the undersigned Beneficiary has hereunto set his hand; if the undersigned is a corporation, it has caused its corporate name to be signed and affixed hereunto by its duly authorized officers.

Dated: Des 26, 2006

Beneficiary: ARVID MOSTAD AND SHIRLEE MOSTAD

}ss.

Name & Title: ARVID MOSTAD

Name & Title: SHIRLEE MOSTAD

State of WA

County of Island

I certify that I know or have satisfactory evidence that ARVID AND SHIRLEE MOSTAD is/are the person(s) who appeared before me, and said person(s) acknowledged that he/she/they signed this document on oath acknowledged said signature(s) as the free and voluntary act of such party(ies) for the uses and purposes mentioned in the instrument.

417 Com

Notary Public in and for the State of WA

Residing at War Nard
My appointment expires ____//-0

11-03-2009