When Recorded Return To:

MICHELE THOMPSON Aurora Loan Services Inc. P.O. Box 1706 Scottsbluff, NE 69363-1706



2/5/2007 Page

1 9:45AM

<u>Deed of Reconveyance</u>

AURORA LOAN SERVICES INC. #:0031524234 "BESANCON" Lender ID:F07/002/0031524234 Skagit, Washington MERS #: 100285700000134022 VRU #: 1-888-679-6377

WHEREAS FIDELITY NATIONAL TITLE INSURANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trustor: BARRY A. BESANCON AND DIANE BESANCON, HUSBAND AND WIFE

Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR WINSTAR MORTGAGE PARTNERS, INC., IT'S SUCCESSORS AND ASSIGNS

Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR WINSTAR

MORTGAGE PARTNERS, INC IT'S SUCCESSORS AND ASSIGNS

Original Trustee: FIRST AMERICAN TITLE COMPANY OF SKAGIT COUNTY

Dated: 07/28/2005 Recorded: 08/02/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

200508020097 In the Records of the County Recorder of Skagit, State of Washington. Property Address: 3414 ROSEWOOD STREET, 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 FIDELITY NATIONAL TITLE INSURANCE COMPANY as Trustee On Physician

ICA N. OHDE , ASSISTANT VICE PRESIDENT

CHEUGH STATE OF COUNTY OF 7 w/4

MILLIA before me, SHEILA LEONARD , a Notary Public in and for JESSICA N. OHDE , ASSISTANT VICE PRESIDENT, personally known to me (or proved to me on the basis of , personally appeared

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.

SS my hand and official seal,

SHEILA LEONARD Notary Public - Georgia **Fulton County** My Comm. Expires Aug. 31, 2010

(This area for notarial seal)

HOTAR,

PUBLIC