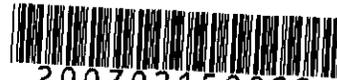


When Recorded Return To:

WASHINGTON MUTUAL
PO BOX 45179
JACKSONVILLE, FL 32232-5179



200702150022
Skagit County Auditor

2/15/2007 Page 1 of 1 11:03AM

Deed of Reconveyance

WASHINGTON MUTUAL - CLIENT 156 #:0706943982 "EBERHART" Lender ID:001/013/0706943982 Skagit, Washington PIF: 02/05/2007

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

Truster: CHARLES M EBERHART AND SUELLEN C EBERHART HUSBAND AND WIFE
Beneficiary: WASHINGTON MUTUAL BANK

Original Beneficiary: WASHINGTON MUTUAL BANK , A WASHINGTON CORPORATION
Original Trustee: FIRST AMERICAN TITLE COMPANY OF SKAGIT C, A CALIFORNIA CORPORA
Dated: 12/05/2005 Recorded: 12/12/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200512120193 In the Records of the County Recorder of Skagit, State of Washington.
Property Address: 725 EVANS DR, SEDRO WOOLLEY, WA 98284

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 February 7th, 2007

JOCELYN TATE , LIEN RELEASE ASSISTANT SECRETARY

STATE OF Florida
COUNTY OF Duval

On February 7th, 2007, 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: 1 1

Sharon L. Rohn
Commission # DD335151
Expires September 18, 2008
Bonded Troy Pain - Insurance, Inc. 800-385-7016

(This area for notarial seal)