

When Recorded Return To:

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



200705070039

Skagit County Auditor

5/7/2007 Page

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1 9:01AM

Deed of Reconveyance

AURORA LOAN SERVICES INC. #:0113394548 "HANES" Lender ID:N36/017/1697289849 Skagit, Washington
MERS #: 100135533390001465 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: THERESA E. HANES, AN UNMARRIED WOMAN
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR FIRST NATIONAL BANK OF ARIZONA IT'S SUCCESSORS AND ASSIGNS
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR FIRST NATIONAL BANK OF ARIZONA IT'S SUCCESSORS AND ASSIGNS
Original Trustee: CHICAGO TITLE COMPANY
Dated: 07/16/2004 Recorded: 07/20/2004 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200407200129 In the Records of the County Recorder of Skagit, State of Washington.
Property Address: 2320 SOUTH 18TH STREET, MOUNT VERNON, WA 98274

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 May 1, 2007

Jessica N. Ohde
JESSICA N. OHDE, ASSISTANT VICE PRESIDENT

STATE OF Georgia
COUNTY OF Fulton

On May 1, 2007, before me, SHEILA LEONARD, a Notary Public in and for Fulton County, Georgia in the State of Georgia, personally appeared JESSICA N. OHDE, ASSISTANT VICE PRESIDENT, 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, 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.

WITNESS my hand and official seal,

Sheila Leonard
Notary Expires 8/31/2010



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

(This area for notarial seal)