

When Recorded Return To:

WASHINGTON MUTUAL
PO BOX 45179
JACKSONVILLE, FL 32232-5179



200706280046
Skagit County Auditor

6/28/2007 Page 1 of 1 9:51AM

APPOINTMENT OF SUCCESSOR TRUSTEE

WASHINGTON MUTUAL - CLIENT 156 #0648469831 "CRAWFORD JR" Lender ID:A02/012/0648469831 Skagit, Washington
PIF: 06/18/2007

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

Original Trustor : CHARLIE D CRAWFORD JR WHO ACQUIRED TITLE AS CHARLES D CRAWFORD AND DOLORES M CRAWFORD HUSBAND AND WIFE

Original Beneficiary : WASHINGTON MUTUAL BANK

Dated: 07/25/2003 Recorded: 08/04/2003 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200308040017 In the County of Skagit State of Washington

Property Address : 1402 ALPINE VIEW DR, MT VERNON, WA 98274

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.

WASHINGTON MUTUAL BANK
On June 21st, 2007

By: 
Jocelyn Tate, Lien Release Assistant Secretary

STATE OF Florida
COUNTY OF Duval

On June 21st, 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: / /

 **Kim Mathys**
Commission # DD401905
Expires March 1, 2009
Bonded Troy Pain - Insurance, Inc. 800-385-7018

(This area for notarial seal)