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1 11:30AM

WHEN RECORDED RETURN

R MIKE ANHOLT SARA ANHOLT P.O. BOX 1257 STANWOOD WA 98292

Filed for Record at Request of Land Title Company of Skagit County

Order No.: 126550-PWE

FULL RECONVEYANCE	
The undersigned as trustee under that certain Dee	d of Trust, dated APRIL 10 2004 in which
R MIKE ANHOLT AND SARA L ANHOLT	is grantor and
LANDS WEST INCORPORATED	is beneficiary, recorded on
MAY 10 2004	as Auditor's No.
200405100203 records of SKAGIT	County, Washington, having received from the
beneficiary under said Deed of Trust a written request to reconvey, reciting that the obligations secured by	
the Deed of Trust have been fully satisfied, does hereby reconvey, without warranty, to the persons entitled	
thereto all of the right, title and interest now held by said trustee in and to the property described in said	
Deed of Trust, situated in SKAGIT County, Washington, as follows:	
Lot B-140 Lake Tyee Division III	
Dated AUGUST 22 2007	
	LAND TITLE COMPANY OF SKAGIT CO
	(Trustee)
	- Longo
	Ву: 7 СМС СТОВО
	Bill Ronhaar (Name-Title) Manager
STATE OF WASHINGTON }ss.	STATE OF WASHINGTON SSS.
COUNTY OF	COUNTY OF SKAGIT
On this day namenally appeared before me	On this 22ND day of AUGUST 2007
On this day personally appeared before me	before me, that undersigned, a Notary Public in and for the State of
to me known to be the individual described	Washington, duly commissioned and sworn, personally appeared
in and who executed the within and	BILL RONHAAR, to me known to be the
foregoing instrument, and acknowledge that	authorized signatory of LAND_TITLE_COMPANY
Toregoing institutions, and acknowledge that	The corporation that executed the foregoing instrument, and
signed the same as	acknowledged said instrument to be the free and voluntary act and deed
25.00	of said corporation, for the uses and purposes therein mentioned, and on
free and voluntary act and deed, for the uses	oath stated that he is authorized to execute to the said instrument
and purposes therein mentioned	
	Witness my hand and official seal hereto affixed the day and year first
	above written.
GIVEN under my hand and official seal this	The Complete of the Complete o
day of	() Marin D. (Miching)
	Sharon R. Anthony
Notary Public in and for the State of Washington,	Notary Public in and for the State of Washington, Residing at MOUNT VERNON
Residing at My Appointment expires	My appointment expires 9/6/2009
SHARON R. ANTHONY	

STATE OF WASHINGTON NOTARY ---- PUBLIC My Commission Expires 9-6-2009