

When Recorded Return To:

WASHINGTON MUTUAL  
PO BOX 45179  
JACKSONVILLE, FL 32232-5179



200710250016  
Skagit County Auditor

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**Deed of Reconveyance**

WASHINGTON MUTUAL - CLIENT 156 #:0696766708 "CALLENDER" Lender ID:A25/258/0696766708 Skagit, Washington PIF: 10/16/2007

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

Trustor: JOE G CALLENDER JR ALSO SHOWN OF RECORD AS JOE C CALLENDER JR AND IRENE B CALLENDER

Beneficiary: WASHINGTON MUTUAL BANK SUCCESSOR BY MERGER TO LONG BEACH MORTGAGE COMPANY

Original Beneficiary: LONG BEACH MORTGAGE COMPANY

Original Trustee: CHICAGO TITLE CO-ISLAND DIVISION

Dated: 10/14/2005 Recorded: 10/24/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200510240104 In the Records of the County Recorder of Skagit, State of Washington.

Property Address: 46744 BAKER LOOP RD, CONCRETE, WA 98237

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 CALIFORNIA RECONVEYANCE COMPANY as Trustee  
On October 19th, 2007

  
GREGORIO T MINIANO, LIEN RELEASE ASSISTANT SECRETARY

STATE OF Florida  
COUNTY OF Duval

On October 19th, 2007, before me, D. PEKUSIC, a Notary Public in and for Duval in the State of Florida, personally appeared GREGORIO T MINIANO, LIEN RELEASE ASSISTANT SECRETARY, 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,

  
D. PEKUSIC  
Notary Expires: 05/30/2009 ##DD435407



D. Pekusic  
Commission # DD435407  
Expires May 30, 2009  
Bonded Troy Pain - Insurance, Inc. 800-385-7019

(This area for notarial seal)