

AFTER RECORDING RETURN TO:
Christopher A. Benson, Attorney
1814 S. 324th Pl. Ste. B
Federal Way, WA 98003



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Skagit County Auditor

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APPOINTMENT OF SUCCESSOR TRUSTEE

Terria Shelver RSI File No.: 07-6166-WA Escrow File No.: 124630-PWE

KNOW ALL MEN BY THESE PRESENTS:

Rodney Billings and Kristin Billings, husband and wife, is the Grantor and Island Title Company, is the Trustee and Mortgage Electronic Registration Systems, Inc. MERS, solely as nominee for Lender and Lenders successors and assigns; Lender is Eagle Home Mortgage, Inc., a Washington Corporation, is the Beneficiary under that certain Deed of Trust dated September 19, 2000 and recorded on September 26, 2000 under Auditor's File No. 200009260101 in the County of Skagit, State of WA. The undersigned, which is the present Beneficiary under said Trust Deed, desires to appoint a new Trustee in the place and stead of the Trustee named above.

NOW THEREFORE, in view of the premises, the undersigned hereby appoints

Christopher A. Benson, Attorney

as Successor Trustee under said Trust Deed, to have all the powers of said original Trustee, effective forthwith.

IN WITNESS WHEREOF, the undersigned Beneficiary has hereunto set his hand; if the undersigned is corporation, it has caused its corporate name to be signed and affixed hereunto by its duly Authorized officer(s).

DATED: 1/7/08

Universal American Mortgage Co.
Beneficiary

By [Signature] VP, Controller
Name - Title

By Jodi Hamilton Assistant
Name - Title

STATE OF Florida)
COUNTY OF Pinellas)

Representative Form

I certify that I know or have satisfactory evidence that Virginia Casagrande and Jodi Hamilton signed this instrument, on both stated that (he / she / they) are authorized to execute the instrument and acknowledge it as the VP, Controller and Assistant Secretary of Universal American Mortgage Co. and acknowledged it to be the free and voluntary act of such party for the uses and purposes mentioned in this instrument.

Dated this 7th day of January Year 2008

[Signature]
NOTARY PUBLIC for the State of FL
Residing at _____
My appointment expires _____

