

When Recorded Return To:

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



200812150104

Skagit County Auditor

12/15/2008 Page 1 of 1 10:08AM

Deed of Reconveyance

AURORA LOAN SERVICES INC. #:0036619989 "MCALLISTER" Lender ID:F01/002/0036619989 Skagit, Washington
MERS #: 100025440002736319 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: MARVIN L MCALLISTER AND TRACY L MCALLISTER , HUSBAND AND WIFE
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR LEHMAN BROTHERS BANK, FSB, A FEDERAL SAVINGS BANK IT'S SUCCESSORS AND ASSIGNS
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR LEHMAN BROTHERS BANK, FSB, A FEDERAL SAVINGS BANK IT'S SUCCESSORS AND ASSIGNS
Original Trustee: CHICAGO TITLE INSURANCE
Dated: 09/30/2005 Recorded: 10/05/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200510050097 In the Records of the County Recorder of Skagit, State of Washington.
Property Address: 300 GARDNER ROAD, BURLINGTON, WA 98233

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.

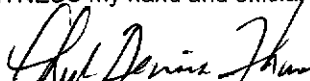
By FIDELITY NATIONAL TITLE INSURANCE COMPANY as Trustee
On 12-8-08


JESSICA N. OHDE, ASSISTANT VICE PRESIDENT

STATE OF GA
COUNTY OF Fulton

On 12-8-08, before me, **CHERYL DENISE THOMAS**, a Notary Public in and for GA in the State of GA, 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,


Notary Expires: 4/7/2012



Cheryl Denise Thomas
NOTARY PUBLIC
Fulton County
State of Georgia
My Commission Expires
April 7, 2012

(This area for notarial seal)