

After Recording Return to:  
Northwest Trustee Services, Inc.  
Attention: Heather L. Smith  
P.O. Box 997  
Bellevue, WA 98009-0997



200904020116  
Skagit County Auditor

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7081.21618/Barnes, Michael B.

GUARDIAN NORTHWEST TITLE CO.

Assignment of Deed of Trust

96965-1

For Value Received, the undersigned as Beneficiary, hereby grants, conveys, assigns and transfers to Flagstar Bank, FSB, whose address is 5151 Corporate Drive Troy, MI 48098 all beneficial interest under that certain deed of trust, dated 04/19/06, executed by Michael B. Barnes, a single man, as his sole & separate property, Grantors, to Joan H. Anderson, EVP on behalf of Flagstar Bank, FSB, Trustee, and recorded on 04/21/06, under Auditor's File No. 200604210113, Records of Skagit County, Washington, describing land therein as:

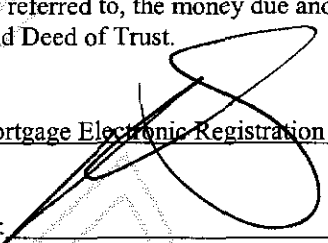
Lot 60, "Skyline No. 3", according to the Plat thereof recorded in Volume 9 of Plats, Pages 54 and 55, records of Skagit County, Washington.

Tax Account No. P59165 3819 000 060 0002

Together with note or notes therein described or referred to, the money due and to become due thereon, with interest, and all rights accrued or to accrue under said Deed of Trust.

Dated March 27, 2009

Mortgage Electronic Registration Systems, Inc.

By:   
Typed Name: Robert R. Stoudemire  
Title: Vice President

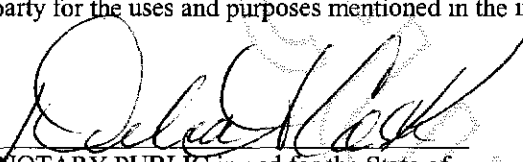
STATE OF Michigan )

COUNTY OF Oakland )

) ss.

I certify that I know or have satisfactory evidence that Robert R. Stoudemire is the person who appeared before me, and said person acknowledged that (he/she) signed this instrument, on oath stated that (he/she) was authorized to execute the instrument and acknowledged it as the Vice President of Mortgage Electronic Registration Systems, Inc. to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: 3-27-09

  
NOTARY PUBLIC in and for the State of

Residing at DELIA A. CORKE  
My commission expires NOTARY PUBLIC, OAKLAND COUNTY, MI  
My Commission Expires 05/02/2012  
Acting in Oakland County, MI

