

When Recorded Return To:

THEODORE SCHULTZ
AURORA LOAN SERVICES LLC.
2617 COLLEGE PARK
P.O. BOX 1706
Scottsbluff, NE 69363-1706



200907230033
Skagit County Auditor

7/23/2009 Page 1 of 1 11:09AM

Deed of Reconveyance

AURORA LOAN SERVICES LLC. #:0017912064 "ZEBOLD" Lender ID:N35/024/1696376693 Skagit, Washington
MERS #: 100053030006341946 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: RYAN ZEBOLD , A MARRIED MAN
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR AEGIS WHOLESALE CORPORATION IT'S SUCCESSORS AND ASSIGNS
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR AEGIS WHOLESALE CORPORATION IT'S SUCCESSORS AND ASSIGNS
Original Trustee: CHICAGO TITLE INSURANCE
Dated: 06/09/2004 Recorded: 06/09/2004 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200406090116 In the Records of the County Recorder of Skagit, State of Washington.
Property Address: 4487 COLONY MOUNTAIN DR, BOW, WA 98232

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 07.17.09

JESSICA N. OHDE , ASSISTANT VICE PRESIDENT

STATE OF GA
COUNTY OF Fulton

On 07.17.09 before me, ALICIA V. WILLIAMS, a Notary Public in and for Fulton 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



Alicia V. Williams
NOTARY PUBLIC
Fulton County
State of Georgia
My Commission Expires
April 7, 2012

(This area for notarial seal)