When Recorded Return To:

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



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Deed of Reconveyance

AURORA LOAN SERVICES LLC. #:0124465972 "FRAZER" Lender ID:H49/004/0124465972 Skagit, Washington MERS #: 100013800921641367 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: GARTH FRAZER AND TAMMY FRAZER, HUSBAND AND WIFE
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR GREENPOINT
MORTGAGE FUNDING, INC. IT'S SUCCESSORS AND ASSIGNS
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR

GREENPOINT MORTGAGE FUNDING, INC IT'S SUCCESSORS AND ASSIGNS

Original Trustee: LAND TITLE COMPANY

Dated: 04/25/2007 Recorded: 05/10/2007 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

200705100162 In the Records of the County Recorder of Skagit, State of Washington.

Property Address: 11552 MARIHUGH PL, MOUNT VERNON, WA 98273

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 10.16.09

A N. OHDE , ASSISTANT VICE PRESIDENT

STANT OF COUNTY OF Fulton

ALICIA V. WILLIAMS On 1010.09 _, before me,

, a Notary Public in and for GA , personally appeared in the State of

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/

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

(This area for notarial seal)