



201006010074

Skagit County Auditor

6/1/2010 Page 1 of 1 9:05AM

When recorded mail to:  
**FA Document Solutions**  
450 E. Boundary St  
Chapin, SC 29036

This space for Recorder's use



Case Nbr: 10423155 7/10/2010

Ref Number: 8015076477

Property Address:

4728 CYPRESS DRIVE

ANACORTES, WA 98221

Tax ID: P11185-7

WA0-R-ST

5/24/2010

Recording Requested By:  
Navy Federal Credit Union

Prepared By:

Sandra Williams

888-603-9011

450 E. Boundary St.

Chapin, SC 29036

## SUBSTITUTION OF TRUSTEE AND DEED OF RECONVEYANCE

NAVY FEDERAL CREDIT UNION, the present beneficiary for the Deed of Trust described below, does hereby substitute **FIRST AMERICAN TITLE INSURANCE COMPANY** as Trustee under said Deed of Trust in place of **DODD, CONEY, BISHOP & LYNCH, INC A WASHINGTON CORP.**

**FIRST AMERICAN TITLE INSURANCE COMPANY**, the present trustee under the Deed of Trust described below, in consideration of full payment and satisfaction of the debt secured thereunder, does hereby reconvey, without warranty, to the person(s) legally entitled thereto all of the estate, title and interest under the Deed of Trust described below:

Original Lender: NAVY FEDERAL CREDIT UNION

Made By: DANA RODRIGUEZ AND DAVID RODRIGUEZ, WIFE AND HUSBAND

Original Trustee: DODD, CONEY, BISHOP &amp; LYNCH, INC A WASHINGTON CORP

Date of Deed of Trust: 8/29/2007

Loan Amount: \$86,000.00


Recorded in Skagit County, WA on: 9/6/2007, book N/A, page N/A and instrument number 200709060065

IN WITNESS WHEREOF, the undersigned has caused this Substitution of Trustee and Deed of Reconveyance to be executed on 5/24/2010

NAVY FEDERAL CREDIT UNION

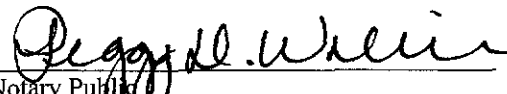
- FIRST AMERICAN TITLE INSURANCE  
COMPANYBy:   
Debra Shealy, Authorized Agent

State of South Carolina, County of Lexington

By:   
Ronald E. Rooney, Vice President

On 5/24/2010, before the undersigned Notary Public, personally appeared **Debra Shealy, Authorized Agent** of **NAVY FEDERAL CREDIT UNION** and **Ronald E. Rooney, Vice President** of **FIRST AMERICAN TITLE INSURANCE COMPANY** 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 document and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the document the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

Witness my hand and official seal.

  
Notary Public**PEGGY D. WILLIAMS**

Notary Public

State of South Carolina

My Commission Expires February 17, 2015