

When Recorded Return To:

Release Department  
LOANCARE, A DIVISION OF FNF SERVICING, INC  
PO Box 8068  
Virginia Beach, VA 23450



201103280039  
Skagit County Auditor

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**Deed of Reconveyance**

LOANCARE, A DIVISION OF FNF SERVICING, INC #:3697521 "GORNE" Lender ID:482/1703953941 Skagit, Washington  
MERS #: 100073020061946735 VRU #: 1-888-679-6377

WHEREAS TRUSTEE SERVICES INC is the present Trustee of record under the following described Deed of Trust:

Trustor: MARK A GORNE AND KRISTI L GORNE HUSBAND AND WIFE  
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SERVICES INC. ("MERS") AS NOMINEE FOR  
FREEDOM MORTGAGE CORPORATION  
Original Beneficiary: FREEDOM MORTGAGE CORP.  
Original Trustee: LAND TITLE COMPANY OF SKAGIT COUNTY  
Dated: 05/22/2007 Recorded: 05/30/2007 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:  
200705300056 In the Records of the County Recorder of Skagit, State of Washington.  
Property Address: 4840 WILDLIFE ACRES LANE, SEDRO WOOLLEY, WA 98284

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 TRUSTEE SERVICES INC as Trustee  
On March 21st, 2011

TAMMIE L ORMEROD , ASSISTANT SECRETARY

STATE OF Washington  
COUNTY OF Kitsap

On March 21st, 2011, before me, KIMBER M. HAMM, a Notary Public in and for Kitsap in the State of Washington,  
personally appeared TAMMIE L ORMEROD , ASSISTANT SECRETARY, 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,

KIMBER M. HAMM  
Notary Expires: 03/31/2012

NOTARY PUBLIC  
STATE OF WASHINGTON  
KIMBER M. HAMM  
COMMISSION EXPIRES 03/31/2012

(This area for notarial seal)