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FILED FOR RECORD BY TOSernce Co

DEC 8 4 46 PX 197 O Lowny AUDITOR & GARY M. OLSON

When Recorded Mail To: LAWRENCE STACE 241 BROOKS RD CARSON WA 98610-3016

FULL RECONVEYANCE

Recording Requested By: T.D. Service Company

Reconveyance #: 149734 Loan #: 0071791503

THE UNDERSIGNED, as trustee under that certain deed of trust described below, conveying real property situated in said county and more fully described in said Deed Of Trust, having received from the beneficiary under said deed of trust a written request to reconvey, reciting that the obligation secured by said deed of trust has been fully paid and performed, hereby does grant, bargain, sell, and convey, but without any covenant or warranty, express or implied, to the person or persons legally entitled thereto, all of the estate held by the undersigned in and to said described premises by virtue of said deed of trust.

Original Grantor: LAWRENCE D. STACE AND SHARON M. STACE, HUSBAND AND WIFE

Original Grantee: TMS MORTGAGE INC., DBA THE MONEY STORE

Current Beneficiary: THE BANK OF NEW YORK; AS TRUSTEE UNDER THE POOLING AND SERVICING AGREEMENT DATED AS OF MAY 31, 1994, SERIES 1994-B

Deed Of Trust Dated: MAY 11, 1994 Recorded on: MAY 18, 1994

As Instrument: 119452

Book: 143

Property Address: 0.25L BROOKS RD. CARSON, WA 98610-

County of SKAMANIA, State Of WASHINGTON.

IN WITNESS WHEREOF, the undersigned trustee has executed this instrument, if the undersigned is a corporation, it has caused its corporate name to be signed hereunto by its officer duly authorized thereunto by order of its Board of Directors. Dated:

T.D. SERVICE COMPANY Trustee

CRAIG DAVENPORT/ASSISTANT SECRETARY

State of CALIFORNIA

County of ORANGE

On 12-2-97, before me, E.M. TOLMASOFF, personally appeared CRAIG DAVENPORT / ASSISTANT SECRETARY ( X ) personally known to me -OR- () proved to me on the basis of satisfactory evidence to be the person(s) whose names(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(ies) and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed

Witness my hand and official seal.

Embremasof6

EM TOLMASOFF Commission # 1148154 Notary Public — California Orange County Ay Comm. Expires Jul 24, 2001