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And When Recorded Mail To: HomBq Servicing Corporation P O Box 13309 Mailcode #CA3501 Sacramento, CA 95813-3309

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FULL RECONVEYANCE

Loan #: 0040197139 Customer #: 740 RLS #: 699160

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: MICHAEL D. STRENEY, AS HIS SEPARATE ESTATE Original Grantee: MILA, INC., A MASHINGTON CORPORATION
CUrrent Beneficiary: THE BANK OF NEW YORK AS TRUSTER UNDER THE POOLING & SERVICING ACRESMENT DATED AS OF NOVEMBER 30, 1997 SERIES 1997-D BY HOMEQ SERVICING CORP. (SUCCESSOR BY MESCER TO THE MORTGAGE INC DEA THE MOREY STORE) ATTORNEY IN PACT Deed Of Trust Dated: OCTOBER 27, 1997 Recorded on: OCTOBER 31, 1997
as Instrument No. 129650 in Book No. 170 at Page No. 502
Property Address: 32 FRANK JOHNS ROAD STEVENSON NA, 93648-County of STAMANIA, State Of MASHINGTON.
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: NOV 06 2002

T.D. ESCROW SERVICES, INC. DBA, T.D. SERVICE COMPANY

Vice President State of County of

NOV 0 6 2002 C. BATTS , before me, appeared Julie A. Yates, 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(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 the instrument.

Witness my hand and official seal.

(Notary Name):

Recording Requested By: HOMEO SERVICING CORPORATION C. BATTS
COMM. #1331734
UTARY PUBLIC-CALIFORNIA ORANGE COUNTY m, Exp. Nov. 23, 2005