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When Recorded Return To:

KAREN SPARROW CITICORP TRUST BANK, FSB 7467 NEW RIDGE ROAD HANOVER, MD 21076

ROXIX 234 PAGE 282 FILE SHOW Systems Dec 23 3 05 Fin 102

J. MICHAEL SALVISON

Appointment of Successor Trustee

CITICORP TRUST BANK, FSB #:247817 "BECKMAN" Skamania, Wishington

WHEREAS , the undersigned is the present Beneficiary under the Deed of Trust Described as follows:

Original Trustor: RICHARD BECKMAN, A SINGLE MAN

Original Trustor: RICHARD BECKMAN, A SINGLE MAN
Original Beneficiary: ASSOCIATES FINANCIAL SERVICES OF WA.
Dated: 10/09/1998 Recorded: 10/20/1998 in Book/Reel/Liber: 182 Page/Folio: 381-384 as Instrument No.: 133160
In the County of Skamania State of Washington

Property Address: 1669 MOFFETT HOT SPRINGS, N BONNEVILLE, WA 98639

AND WHEREAS, the undersigned, who is the present Beneficiary under said Deed of Trust, desires to appoint a successor Trustee under said Deed of Trust in the place and stead of present Trustee thereunder.

Now therefore, the undersigned hereby appoints RELEASE SYSTEMS, INC. whose address is 806 SW BROWNEY.
SUITE 800, PORTLAND, OR 97205 as Successor Trustee under said Deed of Trust, to have all the powers of said original Trustee, effective immediately.

ASSOCIATES FIRST CAPITAL CORPORATION, SUCCESSOR BY MERGER WITH ASSOCIATES FINANCIAL SERVICES COMPANY, INC., A DELAWARE CORPORATION, SUCCESSOR BY REASON OF MERGER WITH ASSOCIATES FINANCIAL SERVICES OF WA. On November 25th, 2002

A. R. HELFRICH, Vice-President

STATE OF Maryland **COUNTY OF Anne Arundel**

On November 25th, 2002, before me, LYDIA M. BROWN, a Notary Public in and for Anne Arundel in the State of On November 25th, 2002, before me, LYDIA M. BRUWN, a Notary Public in and for Anne Arundet in the State of Manyland, personally appeared A. R. HELFRICH, 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,

VITNESS my hand and official seal,

M. BROWN Notary Expires: 01/24/2005

(This area for notarial seal)