FOLI A. N	C FINANCING STATEMENT AMENDMEN LOW INSTRUCTIONS (front and back) CAREFULLY IAME & PHONE OF CONTACT AT FILER [optional] BN AMRO LOAN NO. 0001294197 END ACKNOWLEDGMENT TO: (Name and Address)	I T	Page 1 o Date: Ø Filed by Filed & of SKAMA	2/02/2005 : ABN AMRO MORTGAG Recorded in Offici NIA COUNTY EL GARVISON	12: E GROUP	INC	
	ABN AMRO MORTGAGE GROUP, INC. LIEN RELEASE DEPT 7159 CORKLAN DRIVE JACKSONVILLE FL 32258						
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDA 1b. This FINANCING STATEMENT AMENDA							
	NITIAL FINANCING STATEMENT FILE # lod 08/28/96 # 126115 Rk150 Pg263, Cont'd 07/17/02	2. #145294. Bk226Pø631	₹.	to be filed [for record] REAL ESTATE RECO	(or recorded)		
Filed 08/28/96 # 126115, Bk150 Pg263, Cont'd 07/17/02, #145294, Bk226Pg631 Z. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.							
3.	the second secon						
4.	4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.						
5. A	5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes.						
Also check one of the following three boxes <u>and</u> provide appropriate information in items 6 and/or 7.							
_[CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.	DELETE name: Give record na to be deleted in item 6a or 6b.	ime	ADD name: Complete item also complete items 7e-7g	(ifapplicable)	iasonem rc,	
6. 0	CURRENT RECORD INFORMATION:						
6a, ORGANIZATION'S NAME							
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME		SUFFIX	
	CHANDLER	KATHY		LEA			
7. 0	CHANGED (NEW) OR ADDED INFORMATION:	1 1					
	7a. ORGANIZATION'S NAME						
OR				Tuppie une		SUFFIX	
O.K	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	_ \	MIDDLÉ NAME	J	SUFFIX	
7c. l	MAILING ADDRESS	CITY	7.	STATE POSTAL CODE		COUNTRY	
7d.	SEEINSTRUCTIONS ADD'L INFO RE 76. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZA	ATION	7g. ORGANIZATIONAL ID	t, if any	NONE	
	DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box.					THORE	
	Describe collateral deleted or added, or give entire restated collate						
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which							
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.							
9a. ORGANIZATION'S NAME MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.							
OR	MORTGAGE ELECTRONIC REGISTRATION 9b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME		SUFFIX	
10	OPTIONAL FILER REFERENCE DATA	<u> </u>		<u> </u>		<u> </u>	