

Doc # 2005158293  
Page 1 of 1  
Date: 08/11/2005 09:47A  
Filed by: WASHINGTON MUTUAL BANK  
Filed & Recorded in Official Records  
of SKAMANIA COUNTY  
J. MICHAEL GARVISON  
AUDITOR  
Fee: \$32.00

When Recorded Return To:

SHARON HUBBARD  
171 ROBSON RD  
WASHOUGAL, WA 98671-7379

**Deed of Reconveyance**

WASHINGTON MUTUAL - HOUSTON #:0629284043 "HUBBARD" Skamania, Washington  
WHEREAS WASHINGTON RECONVEYANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trustor: SHARON A. HUBBARD  
Beneficiary: WASHINGTON MUTUAL BANK, FA SUCCESSOR IN INTEREST, BY OPERATION OF LAW, TO  
WASHINGTON MUTUAL BANK  
Original Beneficiary: WASHINGTON MUTUAL BANK  
Original Trustee: GROUP 9, INC.  
Dated: 10/25/2004 Recorded: 11/02/2004 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2004155049  
In the Records of the County Recorder of Skamania, State of Washington.  
Property Address: 171 ROBSON RD, WASHOUGAL, WA 98671-7379

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 WASHINGTON RECONVEYANCE COMPANY as Trustee  
On August 4th, 2005

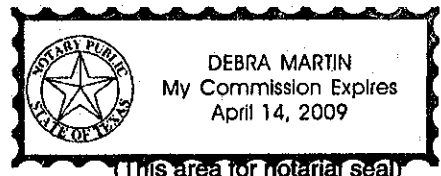
  
W L SALUDO, ASSISTANT SECRETARY

STATE OF Texas  
COUNTY OF Harris

Before me, the undersigned, a Notary Public, on this day personally appeared W L SALUDO, 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. Given under my hand and seal of office, this day August 4th, 2005.

WITNESS my hand and official seal,

  
Notary Expires: / /



(This area for notarial seal)