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T.D. SERVICE COMPANY

and when recorded mail to

T.D. SERVICE COMPANY 1820 E. FIRST ST., SUITE 210 P.O. BOX 11988 SANTA ANA, CA 92711-1988 Doc # 2005159348
Page 1 of 2
Date: 11/01/2005 03:47P
Filed by: CLARK COUNTY TITLE
Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$13.00

55/1080 Space above this line for recorder's use

APPOINTMENT OF SUCCESSOR TRUSTEE

T.S. No: L335904 WA Unit Code: L Loan No: 65165121327101998/HALL

AP #1: 02-06-34-0-0-0300-00

Property Address: 451 BOBS RD., STEVENSON, WA 98648-6172

NOTICE IS HEREBY GIVEN: That the beneficiary desires to substitute a new Trustee under the Deed of Trust hereinafter referred to in the place and stead of the present Trustee thereunder, in the manner provided for in said Deed of Trust and does hereby substitute T.D. ESCROW SERVICES INC., DBA T.D. SERVICE COMPANY, 1820 E. First St., Suite 210, P.O. Box 11988, Santa Ana, CA 92705

WELLS FARGO FINANCIAL NATIONAL BANK C/O SPECIALIZE SERVICE was the original Trustee in the Deed of Trust hereinafter described:

Trustor: BRIAN HALL, SANDY HALL

Original Beneficiary: WELLS FARGO BANK N.A.

Dated November 4, 2003, Recorded December 8, 2003 as Instr. No. --- in Book 255 Page 275 of Official Records in the office of the Recorder of SKAMANIA County; WASHINGTON.

Notice and other personal service may be served on the Trustee at: T.D. ESCROW SERVICES INC.,
DBA T.D. SERVICE COMPANY
520 E. Denny Way
Seattle, WA 98122-2100
(800) 843-0260
Dated 10/27/05

WELLS FARGO BANK N.A.

BY T.D., SERVICE COMPANY, AS ATTORNEY-IN-FACT

CRYSTAL ESPINOZA
ASSISTANT SECRETARY

Page 2

T.S. No: L335904 WA Unit Code: L Loan No: 65165121327101998/HALL

STATE OF CALIFORNIA COUNTY OF ORANGE

))SS

On 10/27/05 before me, D. PATRICK personally appeared CRYSTAL ESPINOZA, 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(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.

Signature Signature

