

When Recorded Return To:

WASHINGTON MUTUAL
PO BOX 45179
JACKSONVILLE, FL 32232-5179

Doc # 2006163036
Page 1 of 1
Date: 09/20/2006 03:35P
Filed by: WASHINGTON MUTUAL HOME LOANS
Filed & Recorded in Official Records
of SKAMANIA COUNTY
SKAMANIA COUNTY AUDITOR
J MICHAEL GARVISON
Fee: \$12.00

APPOINTMENT OF SUCCESSOR TRUSTEE

WASHINGTON MUTUAL - CLIENT 156 #:0025231564 "PEARCE" Lender ID:510/900/1679656352 Skamania, Washington PIF: 09/08/2006

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

Original Trustor : PAUL J PEARCE AND CHRIS L PEARCE , HUSBAND AND WIFE
Original Beneficiary : WASHINGTON MUTUAL BANK , A WASHINGTON CORPORATION
Dated: 12/04/2001 Recorded: 12/12/2001 in Book/Reel/Liber: 218 Page/Folio: 53 as Instrument No.: 143175 In the County of Skamania State of Washington

Property Address : 431 HIGHLAND RD, WASHOUGAL, WA 98671

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 WASHINGTON RECONVEYANCE COMPANY whose address is C/O WASHINGTON MUTUAL, PO BOX 45179, JACKSONVILLE, FL 32232-5179 as Successor Trustee under said Deed of Trust, to have all the powers of said original Trustee, effective immediately.

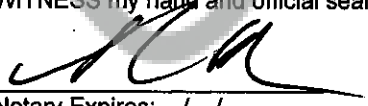
WASHINGTON MUTUAL BANK
On September 15th, 2006

By: 
Jocelyn Tate, Lien Release Assistant Secretary

STATE OF Florida
COUNTY OF Duval

On September 15th, 2006, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared Jocelyn Tate, Lien Release Assistant Secretary, personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.

WITNESS my hand and official seal,


Notary Expires: / /

NOTARY PUBLIC

Shannon Macklin
Commission # DD428678
Expires May 11, 2009
Bonded Troy Pain - Insurance, Inc. 800-368-7019

(This area for notarial seal)