

MICHELE THOMPSON
Aurora Loan Services Inc.
P.O. Box 1706
Scottsbluff, NE 69363-1706

Doc # 2007165921
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Date: 04/30/2007 01:32P
Filed by: AURORA LOAN SERVICES
Filed & Recorded in Official Records
of SKAMANIA COUNTY
SKAMANIA COUNTY AUDITOR
J MICHAEL GARVISON
Fee: \$32.00

Deed of Reconveyance

AURORA LOAN SERVICES INC. #0018467381 "ROSNER" Lender ID:C93/002/0018467381 Skamania, Washington
MERS #: 100247301000082779 VRU #: 1-888-679-6377

WHEREAS FIDELITY NATIONAL TITLE INSURANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trustor: LEE ROSNER

Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR DIRECTORS
MORTGAGE, INC., AN OREGON CORPORATION IT'S SUCCESSORS AND ASSIGNS

Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR DIRECTORS MORTGAGE, INC. AN OREGON CORPORATION ITS SUCCESSORS AND ASSIGNS.

Original Trustee: SKAMANIA COUNTY TITLE

Dated: 10/22/2004 Recorded: 11/08/2004 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2004155111
In the Records of the County Recorder of Skamania, State of Washington.

Property Address: 1103 WACOMAC DR., NORTH BONNEVILLE, WA 98

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 FIDELITY NATIONAL TITLE INSURANCE COMPANY as Trustee
On Mar 14, 2007

On


JESSICA N. OHDE, ASSISTANT VICE PRESIDENT

STATE OF 2
COUNTY OF

On Apr 24, 2007, before me, TINA DETWILER, a Notary Public in and for ALTON COUNTY in the State of GEORGIA, personally appeared JESSICA N. OHDE, 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, executed the instrument.

WITNESS my hand and official seal,

Notary Expires: 3/12/2011



Tina Detwiler
NOTARY PUBLIC
Fulton County
State of Georgia
My Commission Expires
March 12, 2011

(This area for notarial seal)