Doc# 2007168038 Page 1 of 1 Date: 10/22/2007 12:17P Filed by: DOVENNUEHLE NORTGAGE INC Filed & Recorded in Official Records of SKAMANIA COUNTY SKAMANTA COUNTY AUDITOR J MICHAEL GARVISON Fee: \$46.66

AFTER RECORDING FORWARD TO:

Dovenmuehle Mortgage Inc. 1 Corporate Drive, Suite 360 Lake Zurich, IL 60047-8924

Dovenmuehle Mortgage, inc.

1010069400

Lender Id:

FULL RECONVEYANCE

MAYER

DEED OF TRUST REFRENCE :

Dated: 01/11/2002 Recorded: 01/22/2002

Instrument # :

Page # : 471 Book # : 219

Trustor : GORDON E. MAYER AND DEBRA R. MAYER, TRUSTEES OF THE MAYER FAMILY

REVOCABLE TRUST DATED OCTOBER 5, 1995

Original Beneficiary : BOSTON SAFE DEPOSIT AND TRUST COMPANY

Trustee : SKAMANIA COUNTY TITLE COMPANY : Washington County : SKAMANIA State

Amount : \$265,000.00

ASSESSOR'S/TaxID No.: 03-10-21-2-0-0600-00

Legal Description : A TRACT OF LAND IN THE NORTHWEST QUARTER OF SECTION 21, TOWNSHIP 3 NORTH, RANGE 10 EAST OF THE WILLAMETTE MERIDIAN, IN THE COUNTY OF SKAMANIA, STATE OF WASHINGTON, DESCRIBED AS FOLLOWS: LOT 1 OF THE COSSELL SHORT PLAT I, RECORDED IN BOOK 3 OF SHORT PLATS, PAGE 36

SKAMANIA COUNTY RECORDS.

FIDELITY NATIONAL TITLE INSURANCE COMPANY, as Substituted Trustee under the described Deed of Trust, having received from the holder of the obligations a written request to reconvey, hereby reconveys, without warranty, to the person or persons legally entitled thereto, but without warranty, all the estate title and interest now held by said trustee, thereunder.

FIDELITY NATIONAL TITLE INSURANCE COMPANY as TRUSTEE for BOSTON SAFE DEPOSIT AND TRUST COMPANY

On September 06, 2006

GREEN VICE PRESIDENT LINDA

STATE OF

COUNTY OF

Sworn to and subscribed on who before me, Public in and for the County of the State of State of State of State of Personally appeared Inda Seen title Will Provided , 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.

Expires

SHEILA LEONARD Notary Public - Georgia **Fulton County** My Comm. Expires Aug. 31, 2010