

When Recorded Return To:

Michele Klein  
Aurora Loan Services Inc.  
P.O. Box 1706  
Scottsbluff, NE 69363-1706



200405040006  
Skagit County Auditor

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**Deed of Reconveyance**

AURORA LOAN SERVICES INC. #:0108962606 "WILEY" Lender ID:L95/001/0108962606 Skagit, Washington  
MERS #: 100025920001808854 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: RONALD R WILEY AND MARIA V WILEY HUSBAND AND WIFE  
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.  
Original Beneficiary: SUNTRUST MORTGAGE, INC.  
Original Trustee: WASHINGTON ADMINISTRATIVE SERVICES INC  
Dated: 04/23/2002 Recorded: 04/26/2002 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200204260020 In the Records of the County Recorder of Skagit, State of Washington.

Assessor's/Tax ID No. 98882751  
Property Address: 1003 PETERSON RD, BURLINGTON, WA 98233

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 **APR 08 2004**

Christina Ling, Assistant Vice President

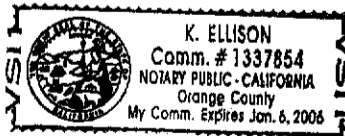
STATE OF California  
COUNTY OF Orange

Christina Ling, Assistant Vice President

On 04-08-2004, before me, K. ELLISON, a Notary Public in and for Orange in the State of California, personally appeared, 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: TT  
K. ELLISON



(This area for notarial seal)