

When Recorded Return To:

Washington Mutual
PO BOX 45179
JACKSONVILLE, FL 32232-5179



200505160028
Skagit County Auditor

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APPOINTMENT OF SUCCESSOR TRUSTEE

WASHINGTON MUTUAL - CLIENT 908 #:0629734799 "BRANSON" Lender ID:G15/603/0629734799 Skagit, Washington PIF:
MERS #: 100073337605205216 VRU #: 1-888-679-6377

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

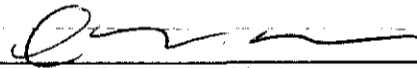
Original Trustor : BRIAN J BRANSON AND VYLA G BRANSON, HUSBAND AND WIFE
Original Beneficiary : MERS AS NOMINEE FOR AMERIGROUP MORTGAGE CORPORATION, A DIVISION OF MORTGAGE INVESTORS CORPORATION
Dated: 07/14/2003 Recorded: 07/23/2003 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200307230095 In the County of Skagit State of Washington

Property Address : 1217 4TH ST, SEDRO WOOLLEY, WA 98284

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.

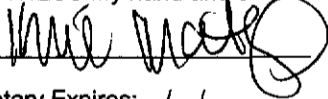
MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.
On May 9th, 2005

By: 
D SAUNDERS, Vice-President

STATE OF Florida
COUNTY OF Duval

Before me, the undersigned , a Notary Public, on this day personally appeared D SAUNDERS, 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. Given under my hand and seal of office, this day May 9th, 2005.

WITNESS my hand and official seal,


Notary Expires: / /



(This area for notarial seal)