

When Recorded Return To:

WASHINGTON MUTUAL
PO BOX 45179
JACKSONVILLE, FL 32232-5179



200704270134
Skagit County Auditor

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Deed of Reconveyance

WASHINGTON MUTUAL - CLIENT 156 #:0708519459 "BAGBY" Lender ID:C04/001/307978761 Skagit, Washington PIF: 04/16/2007

WHEREAS WASHINGTON RECONVEYANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trutor: JUSTIN H BAGBY AND CHRISTINA L BAGBY HUSBAND AND WIFE
Beneficiary: WASHINGTON MUTUAL BANK
Original Beneficiary: WASHINGTON MUTUAL BANK, A WASHINGTON CORPORATION
Original Trustee: CHICAGO TITLE INSURANCE COMPANY
Dated: 12/02/2005 Recorded: 12/09/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200512090107 In the Records of the County Recorder of Skagit, State of Washington.
Property Address: 2400 STONEBRIDGE WAY, MOUNT VERNON, WA 98273

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 WASHINGTON RECONVEYANCE COMPANY as Trustee
On April 19th, 2007

KIMBERLY S MATHYS, LIEN RELEASE ASSISTANT SECRETARY

STATE OF Florida
COUNTY OF Duval

On April 19th, 2007, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared KIMBERLY S MATHYS, 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: / /



(This area for notarial seal)