When Recorded Return To:

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



8/23/2007 Page

9:59AM

**Deed of Reconveyance** 

AURORA LOAN SERVICES INC. # 0019090380 "WIGGINS" Lender ID:C69/002/0019090380 Skagit, Washington MERS #: 100025440001856233 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: JOHN H WIGGINS AND DONALDA WIGGINS, HUSBAND AND WIFE

Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR LEHMAN BROTHERS BANK, FSB, A FEDERAL SAVINGS BANK IT'S SUCCESSORS AND ASSIGNS

Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR LEHMAN BROTHERS BANK, FSB, A FEDERAL SAVINGS BANK IT'S SUCCESSORS AND ASSIGNS

Original Trustee: CHICAGO TITLE

Dated: 09/17/2004 Recorded: 09/23/2004 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

200409230126 In the Records of the County Recorder of Skagit, State of Washington.

Property Address: 612 NORTH 6TH STREET, 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.

ONAL TITLE INSURANCE COMPANY as Trustee

STATE OF COUNTY OF

before me.

a Notary Public in and for , personally appeared

in the State of \_\_\_\_\_\_\_, personally appeared jessically in the State of \_\_\_\_\_\_, personally appeared jessically 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:501/1

**Brittany Snow** NOTARY PUBLIC **Fulton County** State of Georgia Commission Expires

May 21, 2011

(This area for notarial seal)