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STATE OF INDIA A LAKE COUNTY FILED FOR LUMBIA

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RECORDING REQUESTED BY:

CAPITAL FINANCIAL SERVICES, INC.
WHOLESALE MORTGAGE LENDING DIVISION
WHEN RECORDED, MAIL TO:

2345 S. LYNHURST DR., SUITE 109 INDIANAPOLIS, IN 46241

LOAN NUMBER: 01-00345-0

SPACE ABOVE THIS LINE FOR RECORDER'S USE

SUGO 8537 Corporation Assignment of Mortgage

FOR VALUE RECEIVED, CAPITAL FINANCIAL SERVICES, INC. ("Assignor"), having its principal place of business at 2345 S. LYNHURST DR., SUITE 109, INDIANAPOLIS, INDIANA 46241 hereby grants, assigns and transfers to OPTION ONE MORTGAGE CORPORATION, 36 TUCHNOLOGY DRIVE, SUITE 250, IRVINE, CALIFORNIA 92618 ("Assignee") all of Assignor's rights, title and interest in, to, and under that certain Mortgage dated OCTOBER 7, 1999 executed and delivered by MARTIN L. DEVINE & BRENDA DEVINE HUSBAND & WIFE, to Assignor (the "Mortgage"), which Mortgage is recorded concurrently herewith in the Official Records in the County Recorder's office of LAKE County, State of INDIANA, as instrument number 99086894 covering certain real estate and other property described therein, more particularly described as follows:

LOT #56, UTOPIA, UNIT NO. 1 AS SHOWN IN PLAT BOOK 34, PAGE 96 IN LAKE COUNTY, INDIANA.

TOGETHER with the note or notes therein described or referred to therein and secured thereby, the money due and to become due thereon with interest, and all rights accrued or to accrue under said Mortgage.

IN WITNESS WHEREOF, Assignor has caused this Corporation Assignment of Mortgage to be executed by its duly authorized officer as of the day and year first written below.

CAPITAL FINANCIAL SERVICES, INC.

DATE: OCTOBER 8, 1999
STATE OF INDIANA
COUNTY OF MARION

GOOD B Hervey

ROD B. HERVEY, VICE PRESIDENT

On this date, before me, EUGENIA A. DONAHOE, Notary Public, personally appeared ROD B. HERVEY, 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(ies), and that by his/her/their signature(s) 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.

(This area for official notarial seal)

Signature

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Commission Expires: 11/9/01
County of Residence: MARION

This instrument prepared by: MONNIE GLICK, MARION COUNTY, INDIANA

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