

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2005 001127

2005 JAN -7 AM 8:58

MICHAEL A. [unclear]
RECORDER



Satisfaction of Mortgage

WASHINGTON MUTUAL - CLIENT 908 #:0605552686 "LILLEY" Lender ID:G15/244/0605552686 Lake, Indiana PIF: 12/15/2004
MERS #: 100029500003302290 VRU #: 1-888-679-6377

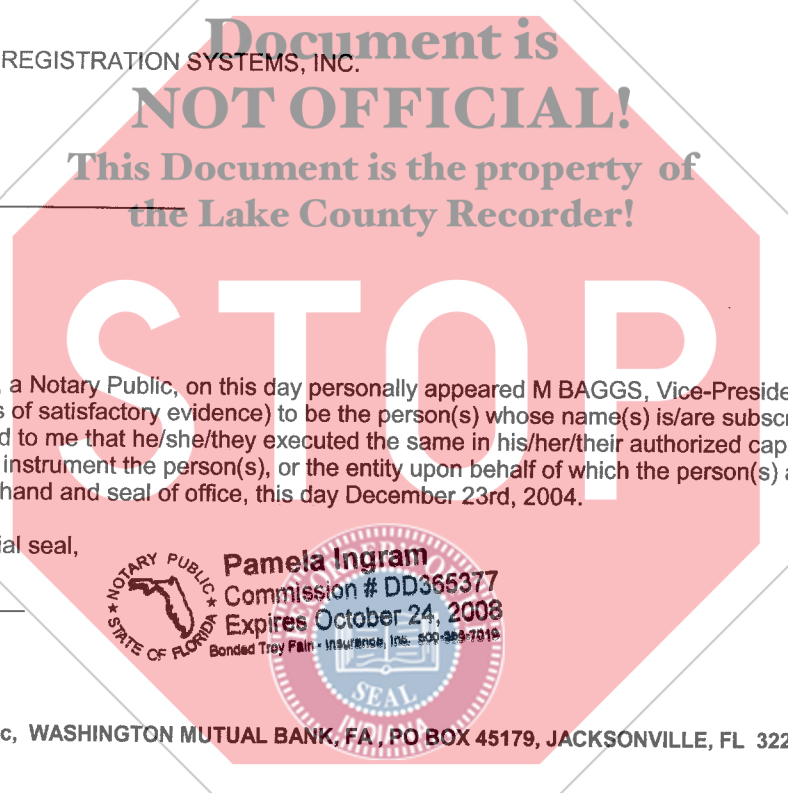
KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., holder of a certain Mortgage to secure the amount of \$83,839.00 whose parties, dates and recording information are below, does hereby acknowledge that it has received full payment and satisfaction of the same, and in consideration thereof, does hereby cancel and discharge said Mortgage.

Original Mortgagor: JAMES D. LILLEY AND PANSIE S. LILLEY
Original Mortgagee: CONTOUR MORTGAGE GROUP, INC.
Dated: 01/09/2003 Recorded: 01/21/2003 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2003006546, In the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 7253 PIERCE ST, MERRILLVILLE, IN 46410-0000

IN WITNESS WHEREOF, the undersigned has, by the officer duly authorized, executed this document.

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.
On December 23rd, 2004

By: M Baggs
M BAGGS, Vice-President



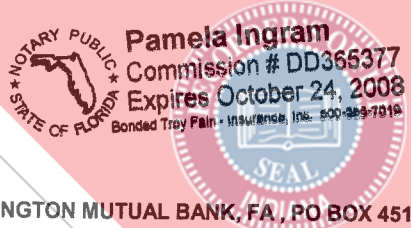
STATE OF Florida
COUNTY OF Duval

Before me, the undersigned, a Notary Public, on this day personally appeared M BAGGS, 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 December 23rd, 2004.

WITNESS my hand and official seal,

[Signature]

Notary Expires: / /



(This area for notarial seal)

Prepared By: **Bijana Mulahasic**, WASHINGTON MUTUAL BANK, FA, PO BOX 45179, JACKSONVILLE, FL 32232-5179 1-866-926-8937
When Recorded Return To:

Washington Mutual
PO BOX 45179
JACKSONVILLE, FL 32232-5179

10.00
CK# 200019410