2.

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 007804

2006 FEB -1 AM 9:57

MICHAEL A. BROWN
RECORDER

Satisfaction of Mortgage

WASHINGTON MUTUAL - CLIENT 908 #:0609193180 "KELSVEN" Lender ID:F25/560/1684599271 Lake, Indiana PIF: 01/24/2006

KNOW ALL MEN BY THESE PRESENTS that WASHINGTON MUTUAL BANK, FA, holder of a certain Mortgage to secure the amount of $111,000.00 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: WAYNE L KELSVEN
Original Mortgagee: BANCGROUP MORTGAGE CORPORATION
Dated: 11/25/2002 Recorded: 12/03/2002 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2002 110358,
In the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 1610 CAMELLIA DRIVE UNIT, MUNSTER, IN 46321

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

Document is
NOT OFFICIAL!
This Document is the property of
the Lake County Recorder!
STOP

WASHINGTON MUTUAL BANK, FA
On January 26th, 2006

By: _____
J Eaker, Lien Release Assistant Secretary

STATE OF Florida
COUNTY OF Duval

On January 26th, 2006, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared J Eaker, 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: / /

NOTARY PUBLIC Shannon Macklin
Commission # DD428678
Expires May 11, 2009
STATE OF FLORIDA Bonded Troy Fain - Insurance, Inc. 800-385-7019

(This area for notarial seal)

Prepared By: Amir Travancic, 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

*AT*ATWAMT*01/26/2006 10:01:23 AM* WAMU05WAMU00000000000000003301449* INLAKE* 0609193180 INSTATE_MORT_REL *AT*ATWAMT*

1200
Ck# 200194159
G.H.

County Form 170

Prescribed by the
State Board of Accounts
(2005)

Declaration

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do hereby affirm under the penalties of perjury:

1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security numbers;

2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, the undersigned, affirm under penalties of perjury, that the foregoing declarations are true.

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the Lake County Recorder!
STOP
RECORDER'S OFFICE SEAL INDIANA

Amir Travancic
Signature of Declarant

Amir Travancic
Printed Name of Declarant

*AT*ATWAMT*01/26/2006 10:01:24 AM* WAMU05WAMU00000000000000003301449* INLAKE* 0609193180 INSTATE_MORT_REL_DEC_IN *AT*ATWAMT*