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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 014761

2006 FEB 24 AM 9:45

MICHAEL A. BROWN
RECORDER

Prepared By: Amanda Miller
After Recording Return To:
Celink
P.O. Box 16247
Lansing, MI 48901
Loan #333054

State of Indiana
County of Lake
SATISFACTION OF MORTGAGE

KNOW ALL MEN BY THESE PRESENTS that Senior Homeowners Financial Services, Inc, holder of a certain Adjustable Rate Home Equity Conversion Mortgage, 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 Adjustable Rate Home Equity Conversion Mortgage.

Original Mortgagor/Trustor:
Original Mortgagee/Beneficiary:
Original Trustee, if any:
Dated:
Date Recorded:
Document/Instrument Number:
Book:
Page:
County:
State:
Amount:

Gladys Parker
Custom Mortgage Inc

January 19th 2001
January 26th 2001
2001-006129

Lake
Indiana
\$99,000.00

Legal Property Description:

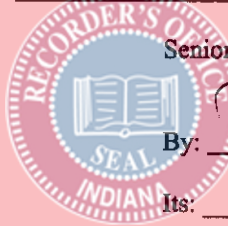
Lot 12, Block 1, Robert R. Cenek First Addition to Gary, as shown in Plat Book 17, Page 27A, Lake County, Indiana, commonly referred to as 4539 Buchanan Street, Gary, Indiana

EXECUTED

February 1, 2006

Senior Homeowners Financial Services, Inc

By: Brenda Row
Its: Vice President



STATE OF North Carolina
COUNTY OF Guilford

On this, February 1, 2006 before me Cathy S Rhodes, personally appeared Brenda Row, who acknowledged ~~himself~~ herself to be the Vice President, for Senior Homeowners Financial Services, Inc being authorized to do so, executed the foregoing instrument for the purposes therein contained.

In witness whereof, I hereunto set my hand and official seal

Cathy S Rhodes
NOTARY PUBLIC
My Commission Expires January 25, 2010

\$12

CRH
54722
9
54794
CAM

Prescribed by the
State Board of Accounts
(2005)

County form 170

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

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



Amanda Miller

Signature of Declarant

Amanda Miller

Printed Name of Declarant