

2006 022932

2006 MAR 21 AM 9:01

MICHAEL A. BROWN
RECORDER

Loan #: 0320813025 Customer #: 763 RLS #: 1152559
Page 1

SATISFACTION OF MORTGAGE

KNOW ALL MEN BY THESE PRESENTS: that the undersigned, holder of a certain 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 mortgage.

Original Mortgagor: **STEPHANIE BULMER**

Original Mortgagee: **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC. ("MERS")**

Original Mortgage Amount: **\$62,000.00**

Dated: **NOVEMBER 03, 2003** Recorded on: **NOVEMBER 26, 2003** as Instrument No. 2003-125314
in DRAWER: --- at CARD: ---

Property Address: **2116 RUSH PL LAKE STATIO IN 46405-**

County of **LAKE**, State of **INDIANA**

IN WITNESS WHEREOF, THE UNDERSIGNED, BY THE OFFICER DULY AUTHORIZED, HAS DULY EXECUTED THE FOREGOING INSTRUMENT ON MARCH 09, 2006

Beneficiary:

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., 1595 SPRING HILL ROAD, SUITE 310, VIENNA, VA 22182 PHONE # (888) 679-6377

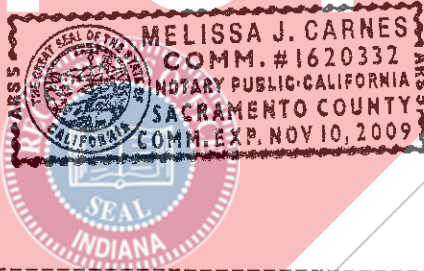
By: Blanca Vargas
Blanca Vargas, Vice President

State of CALIFORNIA
County of SACRAMENTO } ss.

On MARCH 09, 2006, before me, **Melissa J Carnes**, a Notary Public, personally appeared **Blanca Vargas, 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(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.

(Notary Name): **Melissa J Carnes**



PREPARED BY: **PRINCETON RECONVEYANCE SERVICE: P O BOX 13309**
Mailcode #CA3501
Sacramento, CA 95813-3309
Carol Rodriguez

Recording Requested By:
PRINCETON RECONVEYANCE SERVICE

And When Recorded Mail To:
PRINCETON RECONVEYANCE SERVICE
P O BOX 13309
Mailcode #CA3501
Sacramento, CA 95813-3309

CK#
425210426
12.00
A.M.


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 the penalties of perjury, that the foregoing declaration are true.



Signature of Declarant

J. Gualano

Printed Name of Declarant

