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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 023312

2006 MAR 22 AM 9:00

Loan #: 0321192064 Customer #: 774 RLS #: 1150366
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: **RODNEY COX AND JENNIFER COX, HUSBAND AND WIFE**
Original Mortgagee: **FIRST FRANKLIN FINANCIAL CORP., SUBSIDIARY OF NATIONAL CITY BANK OF INDIANA**

Original Mortgage Amount: \$65,000.00
Dated: **DECEMBER 19, 2003** Recorded on: **DECEMBER 29, 2003** as Instrument No. 2003-135266
in DRAWER: --- at CARD: ---

Property Address: **1549 WESTWOOD DR SHELBY IN 46377-**
County of **LAKE**, State of **INDIANA**

IN WITNESS WHEREOF, THE UNDERSIGNED, BY THE OFFICER DULY AUTHORIZED, HAS DULY EXECUTED THE FOREGOING INSTRUMENT ON MARCH 14, 2006

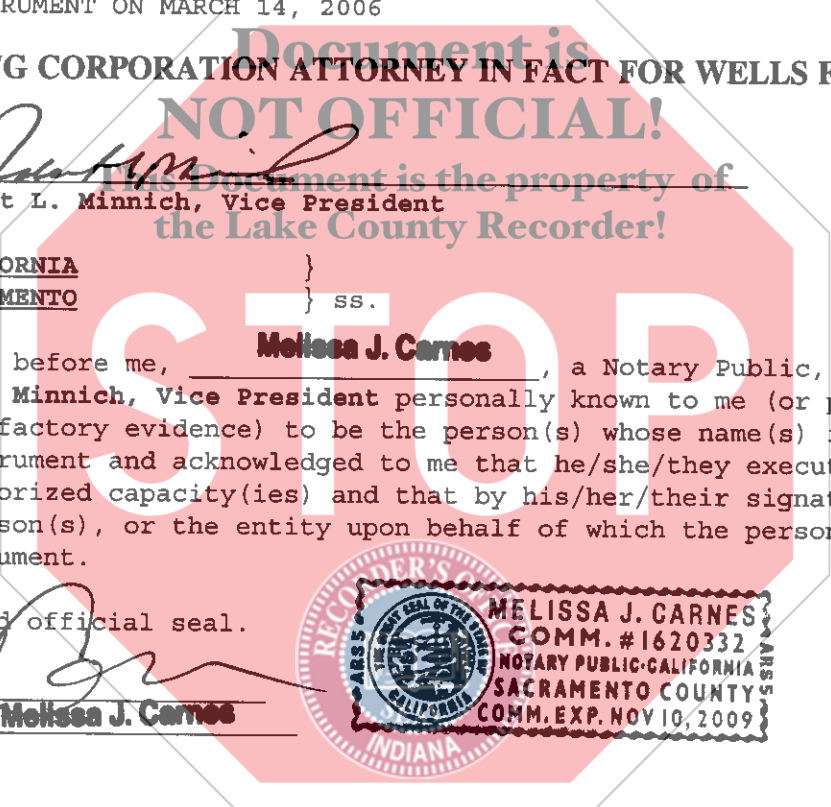
Beneficiary:
HOMEQ SERVICING CORPORATION ATTORNEY IN FACT FOR WELLS FARGO BANK, NA, AS TRUSTEE

By: *Robert L. Minnich*
Robert L. Minnich, Vice President

State of **CALIFORNIA**
County of **SACRAMENTO** } ss.

On MARCH 14, 2006, before me, **Melissa J. Carnes**, a Notary Public, personally appeared **Robert L. Minnich, 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.
Melissa J. Carnes
(Notary Name): **Melissa J. Carnes**



PREPARED BY: PRINCETON RECONVEYANCE SERVICE: P O BOX 13309
Mailcode #CA3501
Sacramento, CA 95813-3309
Mere Biumaiwai

Recording Requested By:
PRINCETON RECONVEYANCE SERVICE

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

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425-213671

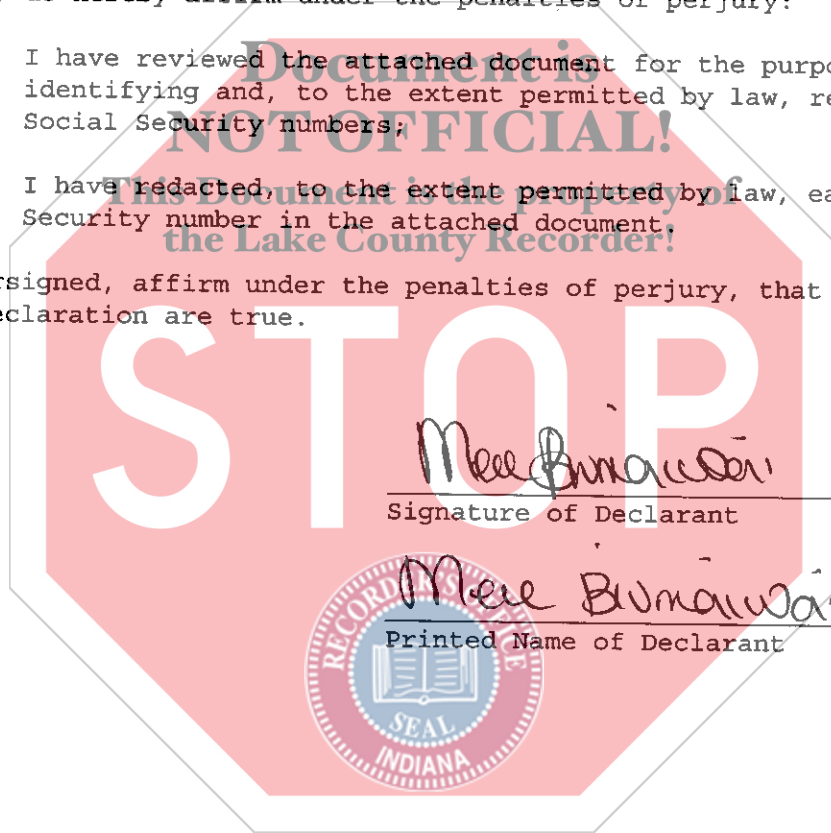
DECLARATION

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.



Mee Bumaui

Signature of Declarant

Mee Bumaui

Printed Name of Declarant