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MICHARI ESOWN

Satisfaction of Mortgage

WASHINGTON MUTUAL - CLIENT 908 #:0600276968 "NOBLE" Lender ID:F18/636/1682329550 Lake, Indiana PIF: 11/20/2007 MERS #: 100021800036989172 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR WASHTENAW MORTGAGE COMPANY, holder of a certain Mortgage to secure the amount of \$43,150.00 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: WILLIAM D NOBLE, A SINGLE PERSON

Original Mortgagee: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS NOMINEE FOR

WASHTENAW MORTGAGE COMPANY

Dated: 07/31/2002 Recorded: 08/02/2002 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2002-069356,

In the offices of the County Recorder of Lake County, in the State of Indiana Property Address: 4239 JOHNSON AVENUE, HAMMOND, IN 46327

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

This Document is the property of

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR WASHTENAW MORTGAGE COMPANY

On November 28th, 2007

Jocelyn Tate, Lien Release Assistant Secretary

STATE OF Florida COUNTY OF Duval

On November 28th, 2007, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared Jocelyn Tate, 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,

etan Evrifica

MIRIAM E. HAPNER
Commission DD365383
Expires October 24, 2008
Bonded Thru Truy Fain Insurance 800-385-7019

(This area for notarial seal)

This instrument was prepared by: Ann Covington, WASHINGTON MUTUAL BANK, FA, PO BOX 45179, JACKSONVILLE, FL 32232-5179 1-866-926-8937

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. Ann Covington.

When Recorded Return To:

, Washington Mutual PO BOX 45179, JACKSONVILLE, FL 32232-5179

*_AC*A_IWAMT*11/28/2007 09:44:12 AM* WAMU05WAMU0000000000000004392395* INLAKE* 0600276968 INSTATE_MORT_REL *_AC*A_IWAMT*

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