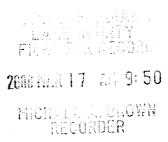
2008 019022





Satisfaction of Mortgage

WASHINGTON MUTUAL - CLIENT 908 #:0053745717 "WOLFE" Lender ID:F19/432/1682792085 Lake, Indiana PIF: 02/28/2008 MERS #: 100029500002766172 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR TAYLOR, BEAN & WHITAKER MORTGAGE CORP., holder of a certain Mortgage to secure the amount of \$80,000.00 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: THERESA ANN WOLFE

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

BEAN, & WHITAKER MORTAGE CORP.

Dated: 09/05/2002 Recorded: 09/13/2002 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2002-082652,

In the offices of the County Recorder of Lake County, in the State of Indiana Property Address: 103 N MICHIGAN AVE, HOBART, IN 46342

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 TAYLOR, BEAN & WHITAKER

MORTGAGE CORP. On February 29th, 2008

Gary Miller, Lien Release Assistant Secretary

STATE OF Florida **COUNTY OF Duval**

On February 29th, 2008, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared Gary Miller, 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

MIRIAM E. HAPNER Commission DD365383 Expires October 24, 2008

(This area for notarial seal)

This instrument was prepared by: Amir Cohkovic, 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. Amir Cohkovic.

When Recorded Return To:

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

*AT*ATWAMT*02/29/2008 02:32:59 PM* WAMU05WAMU000000000000004506983* INLAKE* 0053745717 INSTATE_MORT_REL *AC*ACWAMT*

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