

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2008 065173

2008 SEP 17 AM 9:46

MICHAEL A. BROWN  
RECORDER



**Satisfaction of Mortgage**

WASHINGTON MUTUAL - CLIENT 156 #:0691211684 "NOVALICH" Lender ID:L52/001/0320001168 Lake, Indiana PIF: 08/29/2008  
MERS #: 100265600025129490 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR SEBRING CAPITAL PARTNERS, LIMITED PARTNERSHIP, holder of a certain Mortgage to secure the amount of \$28,400.00 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: KELLY NOVALICH AND PAUL VILLALOBOS  
Original Mortgagee: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS NOMINEE FOR SEBRING CAPITAL PARTNERS, LIMITED PARTNERSHIP  
Dated: 08/21/2006 Recorded: 08/28/2006 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2006 074985,  
In the offices of the County Recorder of Lake County, in the State of Indiana  
Property Address: 427 FISHER ST D, MUNSTER, IN 46321

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

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR SEBRING CAPITAL PARTNERS, LIMITED PARTNERSHIP  
On September 9th, 2008

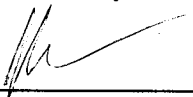
By:   
Jocelyn Tate, Lien Release Assistant Secretary

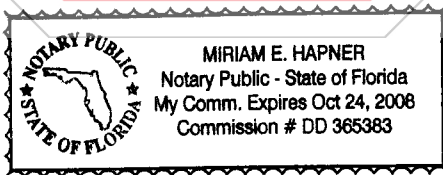
STATE OF Florida  
COUNTY OF Duval

The foregoing instrument was acknowledged before me this 9th day of September, 2008 by Jocelyn Tate as Lien Release Assistant Secretary for MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR SEBRING CAPITAL PARTNERS, LIMITED PART.

Personally Known  Or Produced Identification \_\_\_\_\_ Type of Identification Produced.

WITNESS my hand and official seal,

  
Notary Expires: / /



(This area for notarial seal)

This instrument was prepared by: Suzana Mulahmetovic, WASHINGTON MUTUAL BANK, FA , PO BOX 45179, JACKSONVILLE, FL 32232-5179 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. Suzana Mulahmetovic.

When Recorded Return To:  
, WASHINGTON MUTUAL PO BOX 45179, JACKSONVILLE, FL 32232-5179 ←

12.00  
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PB E