

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2008 066416

2008 SEP 24 AM 8:36

MICHAEL A. BROWN
RECORDER

Satisfaction of Mortgage

LoanCare Servicing Center, Inc. #:4060075 "NAVARRO" Lender ID:640078/0102776084 Lake, Indiana
MERS #: 100013900811124274 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC, AS NOMINEE FOR THE BENEFICIAL OWNER, holder of a certain Mortgage to secure the amount of \$146,585.00 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: MANUEL NAVARRO AND MARIA E NAVARRO HUSBAND AND WIFE
Original Mortgagee: LAKE MORTGAGE COMPANY INC
Dated: 10/10/2006 Recorded: 10/19/2006 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2006 091698,
In the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 1119 NORTH INDIANA AVENUE, GRIFFITH, IN 46319

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

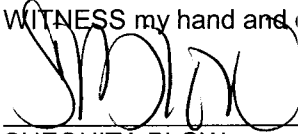
MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC, AS NOMINEE FOR THE BENEFICIAL OWNER
On September 8th, 2008

By: 
HEATHER CALHOUN, Assistant Secretary

STATE OF Virginia
COUNTY OF Suffolk City

ON September 8th, 2008, before me, SHEQUITA BLOW, a Notary Public in and for the City of Suffolk, State of Virginia, personally appeared HEATHER CALHOUN, Assistant Secretary, 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, and that by his/her/their signature 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,


SHEQUITA BLOW
Notary Expires: 06/30/2011 #7156421

(This area for notarial seal)

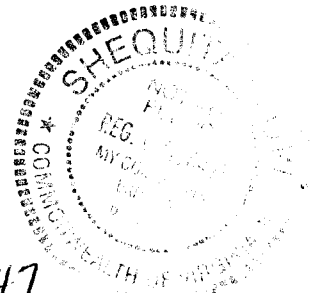
This instrument was prepared by: Shequita Blow, LoanCare Servicing Center, Inc PO Box 8068, Virginia Beach, VA 23450 1-800-274-6600

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. Shequita Blow.

When Recorded Return To:

Release Department, LoanCare Servicing Center, Inc PO Box 8068, Virginia Beach, VA 23450

*SLB*SLBLCSV*09/08/2008 09:25:34 AM* LCSV01LCSVCONVXXXXXXXXXXXX4060075* INLAKE* 4060075 INSTATE_MORT_REL *SLB*SLBLCSV*



✓ #000847
12-

E
BB