STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2009 034197

2009 MAY 21 AM 9: 35

MICHAEL A. BROWH

INmrsd-eR2.0 04/02/2009

When Recorded Return To:

Everhome Mortgage 8100 Nations Way Jacksonville, FL 32256

Property Address:

4921 ELM ST

HAMMOND, IN 46327

The Above Space for Recorder's Use Only 2009(c) By DOCX, LLC

EVER

140

9000325104

MIN #: 100138400000448873

MERS Telephone #: 888/679-6377 CRef#:06/03/2009-PRef#:R114-POF

Date:05/04/2009-Print Batch ID:80191

Recording Requested By:

Everhome Mortgage



MORTGAGE RELEASE, SATISFACTION, AND DISCHARGE

IN CONSIDERATION of the payment and full satisfaction of all indebtedness secured by that certain Mortgage described below, the undersigned, Mortgage Electronic Registration Systems, Inc., whose address is 8100 Nations Way Jacksonville, FL 32256, being the present legal owner of said indebtedness and thereby entitled and authorized to receive said payment, does hereby release, satisfy, and discharge said Mortgage in full and does hereby consent that the same be canceled and discharged of record.

Original Borrower(s): KELLY CHAPMAN

Original Mortgagee: TRUSTCORP MORTGAGE COMPANY, AN INDIANA CORPORATION

Date of Mortgage: 05/30/2001

the Lake Coun Loan Amount: \$50,700.00 Document #: 2001 042541

Recording Date: 06/05/2001 and recorded in the official records of the County of Lake, State of Indiana affecting Real Property and more particularly described on said Mortgage referred to herein.

IN WITNESS WHEREOF, the undersigned has caused these presents to be executed on this date of 05/12/2009.

Mortgage Electronic Registration Systems, Inc.

Abigail Roe Assistant Vice President

State of FL

County of **Duval**

The foregoing instrument was acknowledged before me this 05/12/2009 by Abigail Roe as Assistant Vice President of Mortgage Electronic Registration Systems, Inc., a state of corporation, on behalf of the corporation. He/she is (check one) ____ Personally known to me or ____ Has produced or proved to me through satisfactory evidence of identification, Type of Identification: ____, and acknowledged that he/she, being duly authorized, has executed the same in his/her capacity, the foregoing instrument for the purposes therein mentioned, for and in the name of the corporation.

Witness my hand and official seal on the date hereinabove set forth.

Document Prepared By:

Notary **/**Public:

My Commission Expires: 11/04/2010

Timothy Simmer

8100 Nations Way, Jacksonville, FL 32256

JENNIFER M ADRIEN Notary Public - State of Florida Commission Expires Nov 4, 2010 Commission # DD 597107 Bonded By National Notary Assn

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