

2010 072865

Release of Mortgage

LOANCARE, A DIVISION OF FNF SERVICING, INC #:5664024 "COLAR" Lender ID:642/0204601005 Lake, Indiana MERS #: 100073000839010824 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC, AS NOMINEE FOR THE BENEFICIAL OWNER FREEDOM MORTGAGE CORPORATION, holder of a certain Mortgage to secure the amount of \$153,966.00 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: CLARENCE COLAR

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

MORTGAGE CORPORATION DBA FREEDOM HOME MORTGAGE CORPORATION

Dated: 05/10/2010 Recorded: 05/24/2010 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2010 029493,

In the offices of the County Recorder of Lake County, in the State of Indiana Property Address: 8011 JEFFERSON AVE, MUNSTER, IN 46321-1223

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 FREEDOM MORTGAGE CORPORATION

On December 1st, 2010

WHITE, Vice-President

STATE OF Virginia

COUNTY OF Chesapeake City

On December 1st, 2010, before me, PHYLLIS BRABBLE, a Notary Public in and for Chesapeake City in the State of Virginia, personally appeared REGINA WHITE, Vice-President, 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,

PHYLLIS BRABBLE

Notary Expires: 12/31/2012 #7226025

(This area for notarial seal)

STEELS BRADING

My Comm SXPIRE

This instrument was prepared by: Crystal Davis, LOANCARE, A DIVISION OF FNF SERVICING, 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. Crystal Davis.

When Recorded Return To:

Release Department, LOANCARE, A DIVISION OF FNF SERVICING, INC PO Box 8068, Virginia Beach, VA 23450

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AMOUNT \$ DU CASH _____ CHARGE ____

CHECK # _ () 24133

OVERAGE ______

NON-COM ______