2011 026574



2011 MAY 12 AM 9: 48

After recording return deed to: 2200 N. Main Street Crown Point, IN. 46307

Trustee's Deed

825600

This Indenture Witnesseth that, DeMotte State Bank, as Trustee under the provisions of a Trust Agreement dated October 22, 1975, and known as Trust No. P-5623, in Lake County, and State of Indiana, does hereby grant, bargain, sell and convey to:

Lake County Trust Company, as Trustee of Trust No. P-5623 dated October 22, 1975

for the sum of No dollars (\$0.00) the following described Real Estate in the County of Lake and State of Indiana, to wit: NOTOFFICIAL

SEE ATTACHED FOR LEGAL DESCRIPTIONS is the property of

Key Nos.: 45-24-33-226-001.000-007; 45-24-26-300-001.000-012; 45-24-34-100-002.000-012; 45-24-27-300-001.000-012; 45-24-29-300-005.000-007; 45-24-33-226-001.000-007;

Commonly known as:

vacant land

Address of Grantee:

Mail future tax statements to: 2333 W. 231st Ave Lowell, IN. 46356

2000 N. Main St. Crown Point, IN. 46307

This Deed is executed pursuant to, and in the exercise of, the power and authority granted to and vested in the said Trustee by the terms of said Deed or Deeds in Trust delivered to the said Trustee in pursuance of the Trust Agreement above mentioned, and subject to all restrictions of record.

IN WITNESS WHEREOF, the said DEMOTTE STATE BANK, as Trustee, by Barbara A. Campbell, Vice President and Trust Officer, has hereunto set its hand this 4 # day of May 2011.

DEMOTTE STATE BANK, as Trustee as aforesaid,

Barbara A. Campbell, Vice President and Trust Officer

STATE OF INDIANA, COUNTY OF LAKE

SS:

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared the within named Barbara A. Campbell, Vice President and Trust Officer of DEMOTTE STATE BANK, who acknowledged the execution of the foregoing instrument as the free and voluntary act of said DeMotte State Bank, and as her free and voluntary act, acting for such bank, as Trustee.

Witness my hand and seal this _______ day of May 2011.

<u>USDU</u>County, Indiana resident

My Commission expires: 05 23 16

This instrument was prepared by: Elaine M. Significant States at Law

l affirm, under penalties for perjury, that I have taken reasonable care to redact each Social Security number in

this document, unless required by law. Elaine M. Sievers

CTIC Has made an accomodation recording of the instrument.

Chicago Title Insurance Company

HULT ENTERED FOR TAXATION SUBJECT TO NAL ACCEPTANCE FOR TRANSFER

MAY 1 1 2011

JEGGY HOLINGA KATONA AKE COUNTY AUDITOR

001697

Also, part of the Southwest Quarter of the Northwest Quarter and the Northwest Quarter of the Southwest Quarter of Section 28, Township 32 North Range 8 West of the 2nd P.M., containing 16.53 acres;

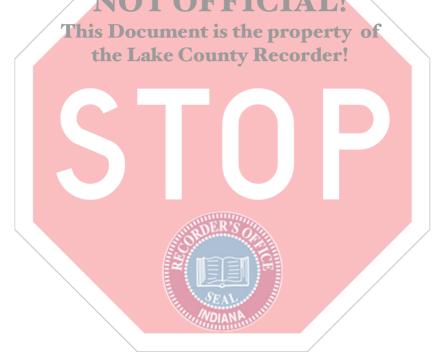
Southeast Quarter of the Northwest Quarter Section 29, Township 32 North, Range 8 West, containing 40 acres;

Southwest Quarter of the Northeast Quarter of Section 29, Township 32, Range 8, containing 40 acres;

A part of the East Half of the Northeast Quarter of Section 29 Township 32, Range 8, containing 15.74 acres;

Part of the East Half of the Southwest Quarter and part of the West Half of the Southeast Quarter North of the railway, Section 29, Township 32, Range 8, containing 111.34 acres;

Part of the East Half of the Southeast Quarter of Section 29; Township 32, Range 8, containing 44.26 acres;



Return To:

LAKE MORTGAGE COMPANY, INC. 4000 W. LINCOLN HWY, MERRILLVILLE, IN 46410

Mortgage

620111010 (17)

Definitions

Words used in multiple sections of this document are defined below and other words are defined in Sections 3, 11, 13, 18, 20 and 21. Certain rules regarding the usage of words used in this document are also provided in Section 16.

(A) "Security Instrument" means this document, which is dated 05/06/11 with all Riders to this document.

, together

(B) "Borrower" is Julia Document is the property of the Lake County Recorder!

Borrower is the mortgagor under this Security Instrument.

NDIANA-Single Family-Fannie Mae/Freddie Mac UNIFORM INSTRUMENT WMP ® Wolters Kluwer Financial Services

AMOUNT \$	(1600
CASH C	HARGE
CHECK #	
OVERAGE	
COPY	
NON-COM	
CLERK	RM

CHICAGO TITLE INSURANCE COMPANY