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2011 MAY 17 PM 1:13

MICHAEL J. FAJMAN
RECORDER

Release of Mortgage



CITIMORTGAGE, INC. #:0701936976 "ZAHARIAS" Lender ID:08001/102862743 Lake, Indiana
MERS #: 100011507019369767 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., holder of a certain Mortgage to secure the amount of \$64,450.00 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: MARIANNE ZAHARIAS
Original Mortgagee: MORTGAGE PLUS, INC. DBA HOME EQUITY MORTGAGE
Dated: 02/16/1999 Recorded: 02/24/1999 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 99016940, In the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 3327 JASPER ST, HOBART, IN 46342

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

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.
On May 9th, 2011

By: W
WALTER H EICHELBERGER,
Vice-President

STATE OF Maryland
COUNTY OF Frederick

On this 9th day of May 2011, before me, the undersigned officer personally appeared WALTER H EICHELBERGER, who made acknowledgment on behalf of MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., who acknowledges himself/herself to be the Vice-President of MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., a corporation, and that he/she as such Vice-President, being authorized so to do, executed the foregoing instrument in their capacity for the purposes therein contained, by signing the name of the corporation by himself/herself as Vice-President.

WITNESS my hand and official seal,

Wanda K. Beane
WANDA K. BEANE
Notary Expires: 10/19/2014

Wanda K. Beane
Notary Public
Frederick Co., MD

This instrument was prepared by:
YOLANDA S. UDOVICH, VERDUGO TRUSTEE SERVICE CORP PO BOX 9443, GAITHERSBURG, MD 20898
1-800-283-7918

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. YOLANDA S. UDOVICH.

When Recorded Return To:
MARIANNE ZAHARIAS, 3327 JASPER ST, HOBART, IN 46342-1227



AMOUNT \$ 12.00
CASH _____ CHARGE _____
CHECK # 161849874
OVERAGE _____
COPY _____
NON-COM _____
CLERK JK