

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2016 002361

2016 JAN 14 PM 2:08

MICHAEL B. BROWN
RECORDER

MERS MIN#: 100011911190404338 PHONE#: (888) 679-6377

Customer#: 1 Service#: 413103RL1 +

Loan#: 1119040433

Page 1

SATISFACTION OF MORTGAGE

KNOW ALL MEN BY THESE PRESENTS: that the undersigned, holder of a certain mortgage, whose parties, dates and recording information are below, does hereby acknowledge the beneficial owner has received full payment and satisfaction of the same, and in consideration thereof, does hereby cancel and discharge said mortgage.

Original Mortgagor: JAN K ANDERSON

Original Mortgagee: EVERHOME MORTGAGE COMPANY

Original Mortgage Amount: 87,000.00

Dated: MARCH 18, 2009 Recorded on: MARCH 31, 2009 as Instrument No. 2009 020328 in DRAWER: --- at CARD: ---

Property Address: 1518 HARRISON AVE, DYER, IN 46311-0000

County of LAKE, State of INDIANA

In witness whereof, the undersigned, by the officer duly authorized, has duly executed the foregoing instrument on DECEMBER 30, 2015

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ACTING SOLELY AS NOMINEE FOR EVERHOME MORTGAGE COMPANY, ITS SUCCESSORS AND ASSIGNS



By: Julie McCombs, Assistant Secretary

State of FLORIDA }
County of DUVAL } ss.

On DECEMBER 30, 2015, before me, C. Ronemous, a Notary Public, personally appeared Julie McCombs, who 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(ies) and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of FLORIDA that the foregoing paragraph is true and correct.

Witness my hand and official seal.



C. Ronemous
(Notary Name): C. Ronemous

THIS INSTRUMENT WAS PREPARED BY: EverBank, 301 W Bay Street Jacksonville, FL 32202,
MICHELLE LITTLE - EVERHOME

Recording Requested By:
EVERBANK

And When Recorded Mail To:
EverBank CC309
301 W Bay Street
Jacksonville, FL 32202



AMOUNT \$ 12
CASH _____ CHARGE _____
CHECK# 433721
FEE _____
COPY _____
NON-CONF _____
DEPUTY GP

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