Prepared By: Justin
TITLE OFFICES, LLC
89 SOUTH ALCANIZ STREET
SUITE A
PENSACOLA, FL. 32502
Incidental to the issuance of a title insurance policy
File Number: **06P-09011**
Lender: Countrywide Home Loans, Inc.
Loan Number: 145030252

20061003000488250 1/1 $11.00
Shelby Cnty Judge of Probate,AL
10/03/2006 10:50:45AM FILED/CERT

NON-IDENTITY AFFIDAVIT

THIS IS AN AFFIDAVIT MADE UNDER OATH. THE MAKING OF A FALSE STATEMENT WILL SUBJECT THE AFFIANT TO SEVERE CRIMINAL PENALTIES.

BEFORE ME, the undersigned authority, personally appeared Affiant, **KENNETH R. WILSON**, whose post office address is **15 MONTE BELLO LANE, MONTEVALLO, AL 35115** and who, being by me first duly sworn on oath, deposes and says:

1. Affiant is the owner of the following described property:

   15 MONTE BELLO LANE, MONTEVALLO, AL 35115

   County of Shelby, State of Alabama

2. Affiant has examined the following liens or judgments which are filed against a name identical to or similar to his/her name, and he/she is not the person named in any of said instruments which are filed in the aforementioned County at the Book and Page designated.

O.R. BOOK	PAGE	TYPE OF INSTRUMENT
20040210000068040		JUDGEMENT/ORDER

3. My Social Security Number is _____ and my Date of Birth is _____.

4. Affiant is familiar with the nature of an oath and with the penalties as provided by the laws of the State of Florida for falsely swearing to statements in an instrument of this nature. Affiant affirms he/she has read the foregoing affidavit and fully understands the facts contained herein. For the purposes of this affidavit, the use of the word "he" is intended and understood to mean all persons executing this affidavit, be it "he," "she" or "they," and singular shall include plural, when indicated.

FURTHER, Affiant sayeth naught.

Kenneth R. Wilson
KENNETH R. WILSON

State of FLORIDA
County of Escambia

THE FOREGOING INSTRUMENT was acknowledged before me on **September 22, 2006**, by **KENNETH R. WILSON**, who is personally known to me or who has produced Drivers license as identification.

Signature: Darlene Crawford
Print Name: _____
Notary Public
My commission expires: _____

DARLENE CRAWFORD
Notary Public State of Florida
Commission No. DD 521523
My Commission Expires May 7, 2010
Notary Seal