THIS INSTRUMENT PREPARED BY:

WASHINGTON MUTUAL BANK, FA, SUCCESSOR TO NORTH AMERICAN MORTGAGE COMPANY, INC.

3883 AIRWAY DRIVE

SANTA ROSA, CA 95403

WHEN RECORDED RETURN TO:

HOMESIDE LENDING 7301 BAYMEADOWS WAY JACKSONVILLE, FL 32256

ATTN: TANGERINE HARRISON MR-RA

7007117 - 456 A10

20030103000006330 Pg 1/1 11.00 Shelby Cnty Judge of Probate, AL 01/03/2003 13:41:00 FILED/CERTIFIED

STATE OF ALABAMA

SHELBY COUNTY

POOL #: 511722

ASSIGNMENT OF MORTGAGE

		TATATE OT				
FOR VALUE RECEIVED, the	undersigned WASHING COMPAN		, FA, SUCC	ESSOR TO NORTH AMERICAN MORTGAGI	E	
hereby sells, assigns, and tra	nsfers and sets over ur	nto			,,	
MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC.				its successors and assigns, as nomi	nee for	
WASHINGTON MUTUAL BANK, FA, SUCCESSOR TO NORTH AMERICAN MORTGAGE COMPANY				its successors and assigns,		
P.O. BOX 2026, FLINT, MI 4	8501-2026			that certain Mortgage executed	l by	
DANIEL MELAH						
to LIBERTY MORTGAGE C	ORPORATION					
in the principal sum of	\$109,100.00	, dated the	9/1/00	and filed for record on the	9/7/0	
in the Office of the Judge of P	robate of	SHELBY	Cou	nty, in Mortgage Book No		
on Page No.	, Instrument Numb	er 200030	773	, together with the debt thereby s	ecured	
and the note therein describe	d below, conveyed by	said mortgage:				
TO HAVE AND TO HOLD, un IN WITNESS WHEREOF, the has caused this instrument to	said WASHINGTON MORTGAGE C	MUTUAL BANK, OMPANY, INC.	FA, SUC	CESSOR TO NORTH AMERICAN ANGERINE HARRISON		
its VICE PRE		, and attested				
DIANA LEBLANC		, its Assistant Sec		th of whom oro		
thereunto duly authorized this	August 27 2002		•	BANK, FA, SUCCESSOR TO NORTH AMER	PICAN	
	August 21, 2002	MORTGAGE		DAIN, IA, GOODEGON TO NORTH ANDER	MOAIT	
Attested BY:	20 Jane					
DIANA LEBLANC		10,				
Its: ASSISTANT SECRETARY	Y	BY: //(MANUGEN)		
STATE OF FLORIDA		TANGERINE		ARRISON		
COUNTY OF DUVAL		VICE	PRESIDE	ENT		
On August	27, 2002	, before me	GA	VIL L. BROOKS , a Notary P	ublic ²	
personally appeared		TANGERIN	IE HARRI	SON		
subscribed to the within instru	ment and acknowledge that by his/her/their sig	ed to me that he/sh nature(s) on the in	ne/they ex	o be the person(s) whose name(s) is/ecuted the same in his/her/their the person(s), or the entity upon beha		
WITNESS my hand and official Signature GAIL L. BROOKS	J. Brot			Gail L Brooks OMMISSION # CC787220 EXPIRES November 1, 2002 ONDED THRU TROY FAIN INSURANCE, INC.	eal)	

AL2 03/02

MIN

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MERS PHONE: 1-888-679-6377

PAGE: 1