

Recording Requested By:
WASHINGTON MUTUAL BANK, FA

When Recorded Return To:

Washington Mutual
PO BOX 45179
JACKSONVILLE, FL 32232-5179

DISCHARGE OF MORTGAGE

WASHINGTON MUTUAL - CLIENT 908 #:0052993326 "MOON" Lender ID:G05/858/0052993326 Shelby, Alabama PIF:
11/12/2004
MERS #: 100073328390800865 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS, that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., hereinafter referred to as the Mortgagee, DOES HEREBY CERTIFY, that a certain Mortgage made and executed by LEONARD H MOON AND KIMBERLY A MOON, HUSBAND AND WIFE AS JOINT TENANTS to secure payment of the principal sum of \$126,320.00 plus interest, originally to MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR AMERIGROUP MORTGAGE CORPORATION, in the County of Shelby, and the State of Alabama, Dated: 05/01/2002 Recorded: 05/13/2002 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 20020513000225620, is now Paid and Satisfied, and is therefore discharged.

In all references in this instrument to any party, the use of a particular gender or number is intended to include the appropriate gender or number as the case may be.

IN WITNESS WHEREOF, the said Mortgagee has set his hand and has caused these presents to be signed by its duly authorized officer(s).

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.
On December 8th, 2004

By: 
K WILSON, Assistant Vice-President

STATE OF Florida
COUNTY OF Duval

On December 8th, 2004, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared K WILSON, Assistant Vice-President, personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.

WITNESS my hand and official seal,

Notary Expires: / /

 **Pamela Ingram**
Commission # DD365377
Expires October 24, 2008
Bonded Troy Pain - Insurance, Inc. 800-386-7019

(This area for notarial seal)

Prepared By: Samir Sutrovic, WASHINGTON MUTUAL BANK, FA , PO BOX 45179, JACKSONVILLE, FL 32232-5179
1-866-926-8937