

RECORDED AT THE REQUEST OF:
DELIA AKPANAH
AFTER RECORDING MAIL TO:
DELIA AKPANAH
INDYMAC BANK
6900 BEATRICE DRIVE
KALAMAZOO, MI 49009

Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 1 Fee: 17.00
BK-1207 PG- 0072 RPTT: 0.00



MAIL TAX STATEMENT TO:
ALISON MAINS-LAY
1317 PORTER DR
MINDEN, NV 89423

Tax ID: 142028701013
Loan No: 100292236
PO Date: 10/25/2007

SUBSTITUTION OF TRUSTEE AND FULL RECONVEYANCE

WHEREAS INDYMAC BANK, F.S.B is/are present owner(s) of a promissory note dated 01/30/2003, executed by DARYL S LAY AND ALISON R MAINS-LAY, HUSBAND AND WIFE, AS JOINT TENANTS in the amount of \$175,000.00 secured by Deed of Trust executed by the makers of said note, wherein, LAWYERS TITLE INSURANCE COMPANY is named as Trustee, recorded 02/14/2003 as Filing No. 0567199 in Book 0203, Page 05691, of Real Estate records, in the Office of the Recorder of DOUGLAS County, NEVADA, and WHEREAS the undersigned as the present beneficiary of the Deed of Trust desire to change the Trustee therein, and

WHEREAS the undersigned further desire to have the property hereinafter mentioned reconveyed by reason of the payment of the indebtedness secured by said Deed of Trust;

NOW, THEREFORE, the undersigned does hereby appoint the undersigned as Trustee under the terms of said Deed of Trust in the place of the original Trustee above mentioned, with the power to perform the Trustee, DOES HEREBY QUITCLAIM AND RECONVEY to the person or persons legally entitled thereto, but without warranty, all of the property covered by said Deed of Trust now held by said Trustee under the terms of said Deed of Trust. Dated this 28th day of November, 2007. I hereby affirm that this document does not contain a social security number.

By:

INDYMAC BANK, F.S.B

State of MICHIGAN
County of KALAMAZOO

)
) SS: KAREN COMPTON
ASSISTANT VICE PRESIDENT

On 11/28/2007 before me, SHANA L MCCLUSKEY a Notary Public in and for said State, personally appeared KAREN COMPTON the, ASSISTANT VICE PRESIDENT personally known to me or 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.

Witness my hand and official seal.

Signature

SHANA L. MCCLUSKEY, Notary Public
State of Michigan, County of Kalamazoo
My Commission Expires Aug. 25, 2012
Acting in the County of Kalamazoo

SHANA L MCCLUSKEY