Doc Number: 0813543

11/29/2012 09:54 AM OFFICIAL RECORDS Requested By. US BANK

DOUGLAS COUNTY RECORDERS Karen Ellison

1 Of 2

7303

Fee: \$ 15.00

APN # 142008217010

Recording Requested By: U.S. BANK HOME MORTGAGE And When Recorded Mail To: U.S. BANK NA 4801 FREDERICA STREET OWENSBORO, KY 42301 KY 42301 KY 42301 MERS MIN#: 100105600023824930 PO BOX 2000 5 42304

PHONE#: (888) 679-6377

Customer#: 1

SUBSTITUTION OF TRUSTEE

Service#: 396176RL

Loan#: 6850069914

The undersigned does hereby affirm that this document submitted for recording does not contain personal information about any person.

WHEREAS, KATHLEEN M REGAN ANS SEAN P REGAN, WIFE AND HUSBAND as Trustor, and MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC AS NOMINEE FOR USAA FEDERAL SAVINGS BANK, ITS SUCCESSORS AND ASSIGNS, as the Original Beneficiary under that certain Deed of Trust, dated APRIL 02, 2008 and recorded APRIL 02, 2008 as Instrument No. 0720777, in Book No. --, at Page No. -- of official records of DOUGLAS County, State of NEVADA.

WHEREAS, the undersigned desires to substitute a Trustee under said Deed of Trust in the place and stead of MICHAEL J BROKER.

NOW THEREFORE, the undersigned hereby substitutes U.S. BANK NA, 4801 FREDERICA STREET, OWENSBORO, KY 42301 0000 as Trustee under said Deed of Trust.

Dated: NOVEMBER 21, 2012

Beneficiary:

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC AS NOMINEE FOR USAA FEDERAL SAVINGS BANK, ITS SUCCESSORS AND ASSIGNS

Laurie Castlen, Assistant Secretary

BK · 1112 PG · 7304 11/29/2012 09:54 AM

Loan#: 6850069914 Srv#: 396176RL1

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 $\begin{array}{ll} \text{State of} & \underline{\textbf{KENTUCKY}} \\ \text{County of} & \underline{\textbf{DAVIESS}} \end{array} \hspace{0.2cm} \} \hspace{0.2cm} \text{ss}$

On NOVEMBER 21, 2012, before me, Cindy Wood, a Notary Public, personally appeared Laurie Castlen, 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 KENTUCKY that the foregoing paragraph is true and correct.

Witness my hand and official seal.

(Notary Name): Cindy Wood Commission Expires: 02/24/2013

Commission No: 391214



