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✓ Everhome Mortgage
✓ P.O. Box 44040
Jacksonville, FL 32231-9970

Doc Number: **0829989**

09/03/2013 04:02 PM

OFFICIAL RECORDS

Requested By:
EVERHOME MORTGAGE

DOUGLAS COUNTY RECORDERS
Karen Ellison - Recorder

Page: 1 Of 2 Fee: \$ 15.00
Bk: 0913 Pg: 299



Deputy gb

APN # 1420-29-812

Recording Requested By: **EVERBANK**

And When Recorded Mail To: **Elite Lender Services PO Box 44060
Jacksonville, FL 32231-4060**

Customer#: 1

FULL RECONVEYANCE

Service#: 207940RL1



Loan#: 9000888819

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

ELITE LENDER SERVICES, as Trustee, or Successor Trustee, Or Substituted Trustee, under Deed of Trust dated **JANUARY 28, 2005**, made by **DENNIS W ZAHN**, Trustor and recorded as **Instrument No. 0636246** on **FEBRUARY 08, 2005**, in **Book No. ---**, at **Page No. ---**, of Official Records in the office of the Recorder of **DOUGLAS** County, **NEVADA**. Said Deed of Trust describes the following property: **As more fully described in said Deed of Trust.**

And having received from holder of the obligations thereunder a written request to reconvey, reciting that all sums secured by said Deed of Trust have been fully paid, and said Deed of Trust and the note or notes secured thereby having been surrendered to said Trustee for cancellation, does hereby **RECONVEY**, without warranty, to the person or persons legally entitled thereto, the estate now held by it thereunder.

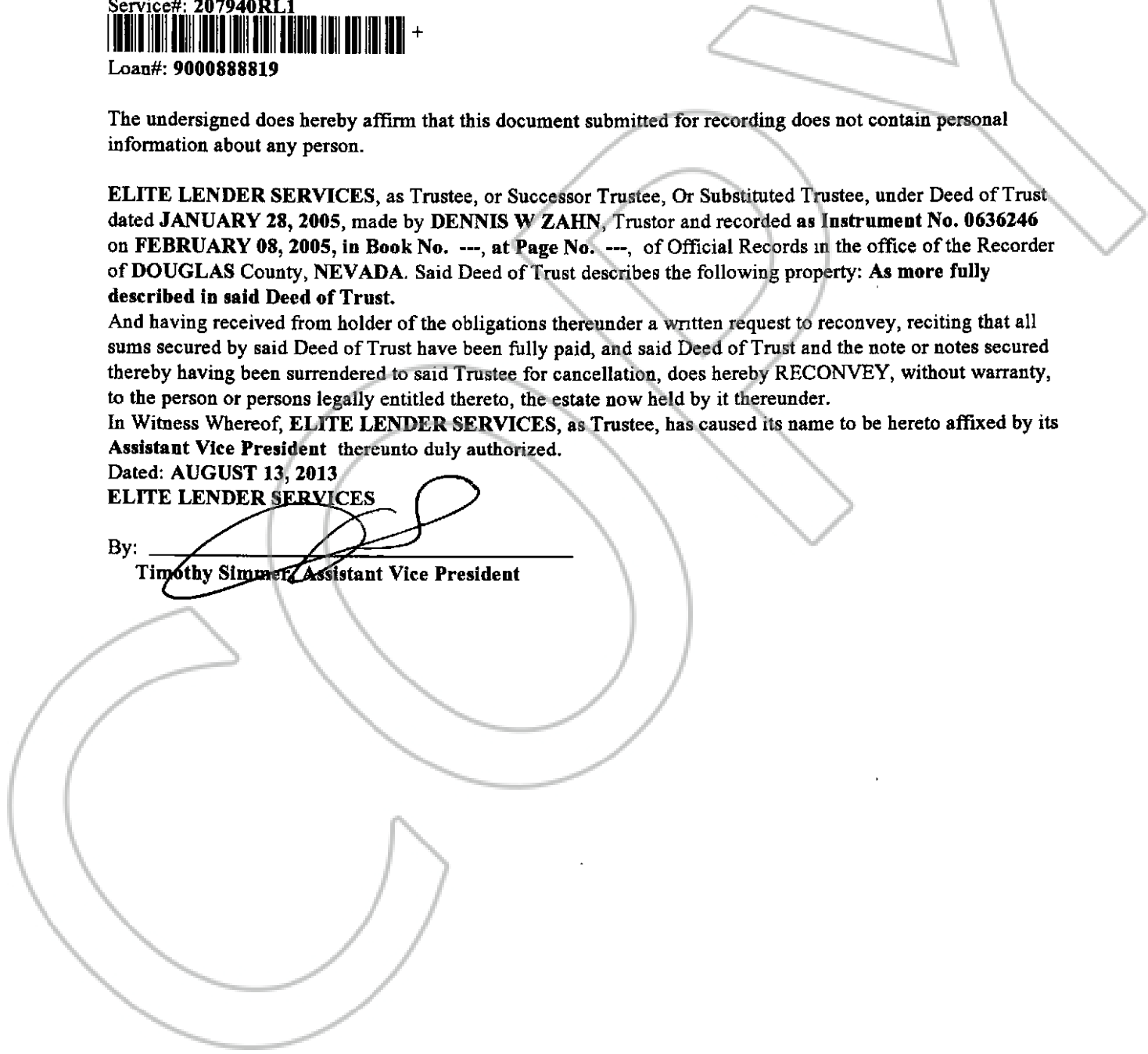
In Witness Whereof, **ELITE LENDER SERVICES**, as Trustee, has caused its name to be hereto affixed by its **Assistant Vice President** thereunto duly authorized.

Dated: **AUGUST 13, 2013**

ELITE LENDER SERVICES

By: _____

Timothy Simmer, Assistant Vice President



Loan#: 900088819 Srv#: 207940RL1
Page 2

State of FLORIDA }
County of DUVAL } ss.

On AUGUST 13, 2013 , before me, Christine C. Mathews, a Notary Public, personally appeared Timothy Simmer , 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 FLORIDA that the foregoing paragraph is true and correct.
Witness my hand and official seal.


(Notary Name): Christine C. Mathews

