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KAREN ELLISON, RECORDER

THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENTS CONTAINS NO INDIVIDUAL'S  
FEDERAL SOCIAL SECURITY NUMBER.

Lisa A. Robinson, Assistant Vice President

Tax ID: 1320-34-002-015

**SUBSTITUTION OF TRUSTEE AND FULL RECONVEYANCE**

WHEREAS, **MICHAEL P GEISSINGER** and **DENISE S GEISSINGER**

is the trustor, **BANK OF AMERICA, N.A.** is the current beneficiary and **PRLAP, INC.** was the original trustee under that certain Deed of Trust dated **10/15/2010** and recorded **10/28/2010**, as Instrument or Document No. **773061**, in Book **1010**, Page **6369**, of Official Records of the County of **Douglas**, State of Nevada.

NOW THEREFORE, Bank of America, N.A., the undersigned Beneficiary hereby substitutes a new trustee, ReconTrust Company, N.A., ("Trustee") under said Deed of Trust, and Trustee does hereby reconvey, without warranty, to the person or persons legally entitled thereto, the estate now held by Trustee under said Deed of Trust.

Dated: 11-12-14

**Trustee:**

ReconTrust Company, N.A.

By: *Lisa A. Robinson*

Lisa A. Robinson, Assistant Vice President

**Beneficiary:**

Bank of America, N.A.

By: *Andrea Long*

Andrea Long, Assistant Vice President

DOCID # 9626818900223679923580

Mail tax statements and  
When recorded return to:  
MICHAEL P GEISSINGER  
DENISE S GEISSINGER  
1546 SCOTI LN  
GARDNERVILLE NV 89410

Recording Requested By:  
Anil Shinde  
ReconTrust Company, N.A.  
4161 Piedmont Parkway  
Mail Stop: NC4-105-01-32  
Greensboro, NC 27410  
(800) 540-2684

**Acknowledgment**

Attached to Substitution of Trustee and Full Reconveyance: 11/12/14  
2 pages including this page

STATE OF North Carolina  
COUNTY OF Guilford

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she signed the foregoing document: Lisa A. Robinson, Assistant Vice President and Andrea Long, Assistant Vice President.

Date: 11/12/14

Laura City  
Laura City, Notary Public  
DOCID # 9626818900223679923580

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When recorded return to:  
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