

✓ Everhome Mortgage  
PO Box 44040  
Jacksonville, FL 32231-9970

DOUGLAS COUNTY, NV 2014-852925  
Rec:\$15.00  
Total:\$15.00 11/18/2014 08:32 AM  
EVERHOME MORTGAGE Pgs=2

APN # 1220-154-100-37

Recording Requested By: **EVERBANK**  
And When Recorded Mail To: **ELITE LENDER SERVICES P.O.**  
**BOX 44060 JACKSONVILLE, FL 32231 4060**  
MERS MIN#: **100188920040971211**  
PHONE#: **(888) 679-6377**



00003503201408529250020024

KAREN ELLISON, RECORDER

Customer#: 1

**SUBSTITUTION OF TRUSTEE**

Service#: 326151RL1



Loan#: 9000877955

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

WHEREAS, **FRANK R ROBINSON AND LISA ROBINSON HUSBAND AND WIFE** as Trustor, and **NATIONAL BANK OF KANSAS CITY A NATIONALLY CHARTERED BANK**, as the Original Beneficiary under that certain Deed of Trust, dated **SEPTEMBER 28, 2004** and recorded **OCTOBER 19, 2004** as Instrument No. **0627036**, in Book No. **1004**, at Page No. **07554** 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 **LAWYERS TITLE REALTY SERVICE**.

NOW THEREFORE, the undersigned hereby substitutes **ELITE LENDER SERVICES, P.O. BOX 44060, JACKSONVILLE, FL 32231 4060** as Trustee under said Deed of Trust.

Dated: **NOVEMBER 03, 2014**

Beneficiary:

**MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC ACTING SOLELY AS NOMINEE FOR NATIONAL BANK OF KANSAS CITY A NATIONALLY CHARTERED BANK ITS SUCCESSORS AND ASSIGNS**

By

  
\_\_\_\_\_  
**Timothy Simmer, ASSISTANT SECRETARY**

Loan#: 9000877955 Srv#: 326151RL1

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State of FLORIDA }  
County of DUVAL } ss.

On **NOVEMBER 03, 2014** , before me, **C. Ronemous**, 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): **C. Ronemous**



**C RONEMOUS**  
**NOTARY PUBLIC**  
**STATE OF FLORIDA**  
Comm# FF079021  
Expires 4/6/2018

