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DEBORAH L. PEYTON, RECORDER/REGISTRA
DELAWARE COUNTY IOWA

Prepared By: Crystal Jenkins, ALTA REAL ESTATE SERVICES, INC. P.O. BOX 551170, JACKSONVILLE, FL 32255 800-944-1212

Return By Mail To:

ENV. B
ALTA REAL ESTATE SERVICES, INC
10401 DEERWOOD PARK BLVD. P.O. Box 551170
ATTN: RECONVEYANCE DEPT.
JACKSONVILLE, FL 32256-9939

SATISFACTION OF MORTGAGE

ALTA REAL ESTATE SERVICES, INC. #:8364000961 "REMPE" Lender ID:B69/8364000961 Delaware, Iowa

KNOW ALL MEN BY THESE PRESENTS that NationsCredit Financial Services Corporation d/b/a EquiCredit whose address is 10401 DEERWOOD PARK BLVD., JACKSONVILLE, FL 32255 holder of a certain Mortgage, whose parties, dates and recording information are below, does hereby acknowledge that it has received full payment and satisfaction of the same, and in consideration thereof, does hereby cancel and discharge said Mortgage.

Original Grantor: LEE E. REMPE AND KATHY L. REMPE, HUSBAND AND WIFE
Original Grantee: NATIONSCREDIT FINANCIAL SERVICES CORPORATION D/B/A EQUICREDIT
Dated: 08/10/2001 Recorded: 09/10/2001 in Book/Reel/Liber: 2001 Page/Folio: 3250 as Instrument No.: N/A in the records of the County Recorder of Delaware State of Iowa

Property Address: 809 NEW ST, MANCHESTER, IA 52057

IN WITNESS WHEREOF, the undersigned, by the officer duly authorized, has duly executed as a free act and deed the foregoing instrument.

NationsCredit Financial Services Corporation d/b/a EquiCredit
On December 7th, 2005

By: _____
B. Williams, Vice-President

STATE OF Florida
COUNTY OF Duval

On December 7th, 2005, before me, SUZANNE SCHLIER, a Notary Public in and for Duval in the State of Florida, personally appeared B. Williams, 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, and that by his/her/their signature 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,

_____
SUZANNE SCHLIER
Notary Expires: 11/15/2009 #DD 490921

SUZANNE SCHLIER
MY COMMISSION # DD 490921
EXPIRES: November 15, 2009
Bonded Thru Notary Public Underwriters

(This area for notarial seal)

*PAP*PAPFLCC*12/07/2005 03:11:03 PM* FLCC01FLCC0000000000000000732539* IADELAW* 8364000961 IASTATE_MORT_REL *CRY*CRYFLCC*