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Rec Amt \$7.00

IND) ANN(SCA!

LISA SMITH, COUNTY RECORDER MADISON IOWA

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

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Return By Mail-To: ---

ALTA REAL ESTATE SERVICES, INC P.O. BOX 551170 ATTN: RECONVEYANCE DEPT. JACKSONVILLE, FL 32255-9939



SATISFACTION OF MORTGAGE

ALTA REAL ESTATE SERVICES, INC. #:8145004720 "ZIEMANN" Lender ID:B11/0014500472 Madison, Iowa KNOW ALL MEN BY THESE PRESENTS that NationsCredit Financial Services Corporation merger to EquiCredit Corporation of Ia. 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: MARK A. ZIEMANN AND ROBIN L. ZIEMANN, HUSBAND AND WIFE

Original Grantee: EQUICREDIT CORPORATION OF IA.

Dated: 06/23/1997 Recorded: 06/27/1997 in Book/Reel/Liber: 189 Page/Folio: 722 as Instrument No.:

3698 in the records of the County Recorder of Madison State of Iowa

Property Address: 1396 OLD PORTLAND RD, VAN METER, IA 50261

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 merger to EquiCredit Corporation of Ia. On April 23rd, 2007

Tina Wittlinger, Assistant Secretary

STATE OF Florida COUNTY OF Duval

On April 23rd, 2007, before me, JOHN J. CAIN, a Notary Public in and for Duval in the State of Florida, personally appeared Tina Wittlinger, Assistant Secretary, 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.

JOHN J. CAIN

Nøtary Expires: 11/14/2009 #DD 490337

