

UNOFFICIAL COPY

RECORDING REQUESTED BY:
Peelle Management Corp.

AND WHEN RECORDED MAIL TO:
Peelle Management Corp.
P.O. Box 1710
Campbell CA 95009-1710



Doc#: 0506942174
Eugene "Gene" Moore Fee: \$26.50
Cook County Recorder of Deeds
Date: 03/10/2005 10:36 AM Pg: 1 of 2

Loan Number: 0436990950

RELEASE OF MORTGAGE

Illinois

KNOW ALL MEN BY THESE PRESENTS that, Mortgage Electronic Registration Systems, Inc. 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 Mortgagor(S): STEPHANIE R WHITE

Original Mortgagee(S): NEW CENTURY MORTGAGE CORPORATION

Original Instrument No: 0001095685 Date of Note: 10/15/2003 Original Recording Date: 12/01/2003

Property Address: 6917 S Oglesby Ave #2 Chicago Chicago, IL 60649

Legal Description:

UNIT "B" TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN 6917 OGLESBY CONDOMINIUM, AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NUMBER 21044957 AND AS AMENDED FROM TIME TO TIME, IN THE EAST HALF OF THE SOUTHEAST QUARTER OF SECTION 24, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Pin #: 20-24-420-024-1002

County: Cook County, State of Illinois

IN WITNESS WHEREOF, the undersigned has caused this instrument to be executed on this date of 03/01/2005.

Mortgage Electronic Registration
Systems, Inc.

== Kenneth E Palmer Jr ==

By: Kenneth E Palmer Jr.

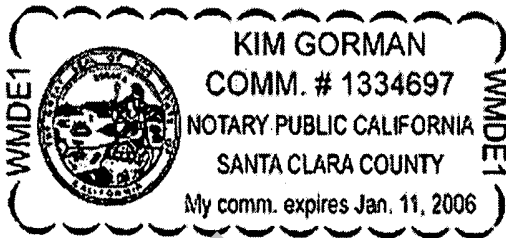
Title: Vice President

State of CA }
City/County of Santa Clara }

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This instrument was acknowledged before me on 03/01/2005 by Kenneth E Palmer Jr., AUTHORIZED OFFICER of Mortgage Electronic Registration Systems, Inc., on behalf of said corporation.

Witness my hand and official seal on the date hereinabove set forth.



== Kim Gorman ==

Notary Public: Kim Gorman

My Commission Expires:

01/11/2006

Resides in: Santa Clara

