

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
Phone: (800) 331-3282 Fax: (818) 662-4141

B. SEND ACKNOWLEDGEMENT TO: (Name and Address) 510953 ITELERENT

UCC Direct Services 5608673
P.O. Box 29071
Glendale, CA 91209-9071 ILIL

File with: Cook, IL



0021292752

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME
SUNRISE HOSPITALITY INC.

OR
1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

1c. MAILING ADDRESS
2112 S. ARLINGTON HEIGHTS ROAD CITY **ARLINGTON** Cont On Adden. STATE **IL** POSTAL CODE **60005** COUNTRY

1d. TAX ID #: SSN OR EIN **36-4320680** ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION **CORPORATION** 1f. JURISDICTION OF ORGANIZATION **IL** 1g. ORGANIZATIONAL ID #, if any **60317542** NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR
2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

2d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME
VENDOR CAPITAL GROUP

OR
3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY
4191 FAYETTEVILLE ROAD **RALEIGH** **NC** **27603**

4. This FINANCING STATEMENT covers the following collateral:
 80-ARMOIRE-3 DRW (OPEN), 36 X 23 X 58; 80-TV PULLOUT SWIVEL; 50-DOUBLE HEADBOARD IN PANEL STYLE, 56 X 24; 55-KING HEADBOARD IN ARCH STYLE, 84 X 32; 80-NIGHTSTAND-1 DRW, 17 X 22 X 24; 80-DESK W/1 DRAWER, 48 X 24 X 30; 1-ROUND ACTIVITY TABLE, 32D X 30; 5-COCKTAIL TABLE, 42 X 20 X 18; 81-LAMP TABLE, 24 X 21 X 21; 76-LOUNGE CHAIR, 35 X 37 X 39; 76-OTTOMAN, 26 X 19 X 17; 80-ERGONOMIC DESK CHAIR; 5-SOFA SLEEPER, 75 X 35 X 34; 80-SINGLE ARM WALL LAMP W/ CORD COVER, 4INX6IN; 80-DESK LAMP W DATA PORT, 27IN H; 80-CONSOLE TABLELAMP, 25IN H; 81-CONSOLE TABLELAMP, 29IN H; 80-FLOOR LAMP, 58IN H; 50-BHR II FULL XL MATTRESS SET; 55-BHR II KING MATTRESS SET; 50-FULL XL BED FRAME; 55-KING BED FRAME; 6-39IN X 75IN DELUXE TUBULAR ROLLAWAY W/ INNER SPRING MATTRESS; 81-MICRO-FRIDGE; 2.7 CU. FT. SINGLE DOOR FROSTFREE REFRIGERATOR. DOES NOT HAVE ICE TRAY COMPARTMENT (SO REFRIG ONLY). 0.6 CU. FT./700 WATT MICROWAVE W/INTERNAL POWER CIRCUIT; 81-ZENITH 27IN COLOR TV W/SMART PLUG; 1-ZENITH VCR, 4 HEAD W/REMOTE; 1-ZENITH 25IN COLOR TV W/SMART PLUG; 1-WALL MOUNT; 1-CLONING DEVICE; 1-MASTER REMOTE; 4-ICE MAKER, DICE SIZE CUBES, AIR-COOLED, SELF-CONTAINED CONDENSER, STNLS STEEL PRODUCES UP TO 530 LB OF ICE/24 HRS; 4-VENDING ICE DISPENSER, PUSH BUTTON, FLOOR MODEL, STNLESS STEEL EXT W/ VINYL TRIM, APPROX. 180 LB CAPACITY; 5-WATER FILTER; 1-ICE MAKER WITH BIN, CUBE STYLE, AIR-COOLED, SELF-CONTAINED CONDENSER, STAINLESS STEEL PRODUCES UP TO 285 LBS OF ICE/24 HRS; 1-KOOLAIRE FREEZER, REACH-IN, ONE-SECTION, SELF-CONTAINED REFRIG SYSTEM, CAM-LIFT HINGED DOOR, TOP MOUNT CMPRSE, ALUMINUM EXT AND INT., STAINLESS STEEL FRONT AND FLOOR, CASTERS STD (2 W/BREAKS), 2 YRS PARTS & LABOR WARRANTY; 1-KOOLAIRE REFRIDGERATOR, REACH-IN, ONE-SECTION, SELF-CONTAINED REFRIG SYSTEM, CAM-LIFT HINGED DOOR, TOP MOUNT CMPRSE, ALUMINUM EXT AND INT., STAINLESS STEEL FRONT AND FLOOR, CASTERS STD (2 W/BREAKS), 2 YRS PARTS & LABOR WARRANTY; 2-AMANA HOSPITALITY MICROWAVE OVEN; 1-TREADMILL, 3.0 HP, PROGRAMMABLE, LONG RUNNING BELT; 1-RECUMBENT

Continued on addendum.

5. ALTERNATIVE DESIGNATION (if applicable) LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA



3050
11/21/02

FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME: SUNRISE HOSPITALITY INC.
9b. INDIVIDUAL'S LAST NAME, FIRST NAME, MIDDLE NAME, SUFFIX

10. MISCELLANEOUS

5608673-40-1
.510953 ITELERENT
Donna Panko
1547-001, 002, 003 &
File with: Cook, IL

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME: SUNRISE HOSPITALITY INC.
11b. INDIVIDUAL'S LAST NAME, FIRST NAME, MIDDLE NAME, SUFFIX
11c. MAILING ADDRESS: 2112 S. ARLINGTON HEIGHTS ROAD, ARLINGTON HEIGHTS, IL 60005
11d. TAX ID#: SSN OR EIN, ADD'L INFO RE ORGANIZATION DEBTOR
11e. TYPE OF ORGANIZATION: CORPORATION
11f. JURISDICTION OF ORGANIZATION: IL
11g. ORGANIZATIONAL ID #: 60317542

12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P's NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME
12b. INDIVIDUAL'S LAST NAME, FIRST NAME, MIDDLE NAME, SUFFIX
12c. MAILING ADDRESS

13. This FINANCING STATEMENT covers collateral or is filed as a fixture filing.

14. Description of real estate:

Description: SEE "EXHIBIT A" PIN# 08-16-200-110

16. Additional collateral description:

CYCLE, PROGRAMMABLE, CORDLESS; 1-CROSS TRAINER, PROGRAMMABLE, DUAL ACTION ARMS; 1-NAUTILUS TOTAL BODY SYSTEM, SINGLE STACK STRENGTH STATION; 7-BULLNOSE EDGE 1 ?IN X 1 ?IN SQUARE TABLE, 36IN X 36IN; 8-BULLNOSE EDGE 1 ?IN X 1 ?IN RECTANGLE TABLE, 24IN X 30IN; 15-TABLE BASE 3IN, FINISH: STANDARD POWDER COAT; 56-STACK CHAIRS, FRAME: GOLDTONE H-29; 44 MILANO UPHOLSTERED BACK CHAIR, FRAME: S-18 SATIN BLACK; 1-PODIUM BY EGAN, 24W X 21DX 48H, FINISH: SAND; 1-PODIUM TABLE TOP BY EGAN, 24W X 21D X 18H, FINISH: SAND; 1-DOUBLE PED DESK, 30D X 60W ? 2/2 W/LOCKS; 1-CREDENZA W/KNEE SPACE, 24D X 60W; 1-DOUBLE PED DESK, 36D X 72W ? 2/2 W/LOCKS; 1-CREDENZA W/KNEE SPACE, 24D X 72W; 3-LATERAL FILE CABINET, 4 DRW, 42W, 700 SERIES, FINISH: TAN; 1-VERTICAL FILE CABINET, 5 DRW W/LEGAL, 28 ?IN D, COLOR: TAN; 2-FOLDING TABLE, 72 X 30; 5-DOUBLE TIER LOCKER, 18IN D X 72IN H X 12IN W, COLOR: TAN AS DESCRIBED IN SCHEDULE 1, SCHEDULE 2, SCHEDULE 3 & SCHEDULE 3 ADDENDUM I OF MASTER LEASE #1547.000 WHETHER NOW EXISTING OR HEREAFTER ACQUIRED ON OR REMOVED FROM DEBTOR'S PREMISES. THIS EQUIPMENT IS INSTALLED AT:

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

17. Check only if applicable and check only one box.

Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY
Filed in connection with a Manufactured-Home Transaction -- effective 30 years
Filed in connection with a Public-Finance Transaction -- effective 30 years

Handwritten notes and signatures on the right margin.

FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME: SUNRISE HOSPITALITY INC.
9b. INDIVIDUAL'S LAST NAME, FIRST NAME, MIDDLE NAME, SUFFIX

10. MISCELLANEOUS

5608673-40-1
510953 ITELERENT
Donna Panko
1547-001, 002, 003 &
File with: Cook, IL

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME
11b. INDIVIDUAL'S LAST NAME, FIRST NAME, MIDDLE NAME, SUFFIX
11c. MAILING ADDRESS: CITY, STATE, POSTAL CODE, COUNTRY
11d. TAX ID#: SSN OR EIN, ADD'L INFO RE ORGANIZATION DEBTOR
11e. TYPE OF ORGANIZATION
11f. JURISDICTION OF ORGANIZATION
11g. ORGANIZATIONAL ID #, if any [] NONE

12. [] ADDITIONAL SECURED PARTY'S or [] ASSIGNOR S/P's NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME
12b. INDIVIDUAL'S LAST NAME, FIRST NAME, MIDDLE NAME, SUFFIX
12c. MAILING ADDRESS: CITY, STATE, POSTAL CODE, COUNTRY

13. This FINANCING STATEMENT covers [] timber to be cut or [] as-extracted collateral or is filed as a [] fixture filing.

14. Description of real estate:

16. Additional collateral description:

WINGATE INN, 2112 S. ARLINGTON HEIGHTS, ARLINGTON HEIGHTS, IL 60005. ALL OF THE EQUIPMENT HEREIN OR HEREAFTER STATED IS LEASED TO DEBTOR BY SECURED PARTY. DEBTOR IS CONTRACTUALLY BOUND TO CAUSE ANY BUYER OF THE PREMISES UPON WHICH THE EQUIPMENT IS LOCATED TO ASSUME ALL OF THE DEBTOR'S OBLIGATIONS TO SECURED PARTY UNDER THE LEASE, WITHOUT MODIFICATION OF THE TERM & CONDITION THEREOF, WHICH ASSUMPTION IS A CONDITION PRECEDENT TO ANY SALE OF SUCH PROPERTY. THIS IS A "PRECAUTIONARY" FIXTURE FILING THE SECURED PARTY DOES NOT CONCEDE THAT THE GOODS ARE OR WILL BECOME FIXTURES. SEE AMENDED OFFICIAL COMMENT & 9-313. THIS FILING IS TO BE RECORDED IN THE REAL ESTATE RECORDS.

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

17. Check only if applicable and check only one box. Debtor is a [] Trust or [] Trustee acting with respect to property held in trust or [] Decedent's Estate

18. Check only if applicable and check only one box. [] Debtor is a TRANSMITTING UTILITY [] Filed in connection with a Manufactured-Home Transaction -- effective 30 years [] Filed in connection with a Public-Finance Transaction -- effective 30 years

"EXHIBIT A"

Legal Description: Wingate Inn, 2112 S. Arlington Heights Rd
Arlington Heights, IL 60005

THAT PART OF LOT 7 IN THE SUBDIVISION OF JOSEPH A. BARNES FARM IN SECTIONS 9, 15 AND 16, TOWNSHIP 41 NORTH, RANGE 11 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, DESCRIBED AS FOLLOWS: COMMENCING AT A POINT IN THE CENTER LINE OF ARLINGTON HEIGHTS ROAD (BEING THE EAST LINE OF SAID LOT 7) THAT IS 200 FEET SOUTHERLY, AS MEASURED ALONG SAID CENTER LINE OF ROAD, OF THE NORTH LINE OF SAID LOT 7; THENCE WEST PARALLEL WITH THE NORTH LINE OF SAID LOT 7, A DISTANCE OF 441.27 FEET; THENCE SOUTHERLY PARALLEL WITH THE CENTER LINE OF SAID ROAD, A DISTANCE OF 150 FEET; THENCE EAST PARALLEL WITH THE NORTH LINE OF SAID LOT 7, A DISTANCE OF 441.27 FEET TO A POINT IN THE CENTER LINE OF SAID ROAD; THENCE NORTHERLY ALONG SAID CENTER LINE A DISTANCE OF 150 FEET TO THE PLACE OF BEGINNING, IN COOK COUNTY, ILLINOIS, EXCEPT THAT PART OF LOT 7 IN THE SUBDIVISION OF JOSEPH A. BARNES' FARM, BEING A SUBDIVISION IN SECTION 16, TOWNSHIP 41 NORTH, RANGE 11 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, ACCORDING TO THE PLAT THEREOF RECORDED MAY 29, 1899 AS DOCUMENT 282676, DESCRIBED AS FOLLOWS: COMMENCING AT THE NORTH EAST CORNER OF SAID LOT 7,

THENCE ON AN ASSUMED BEARING SOUTH 7 DEGREES 13 MINUTES 20 SECONDS WEST ALONG THE EASTERLY LINE OF SAID LOT 7, BEING ALSO THE CENTER LINE OF ARLINGTON HEIGHTS ROAD A DISTANCE 200.00 FEET TO THE GRANTOR'S NORTH PROPERTY LINE, BEING ALSO THE POINT OF BEGINNING; THENCE CONTINUING SOUTH 7 DEGREES 12 MINUTES 20 SECONDS WEST ALONG THE SAID EASTERLY LINE OF LOT 7, BEING ALSO THE CENTER LINE OF ARLINGTON HEIGHTS ROAD, A DISTANCE OF 150.00 FEET TO THE GRANTOR'S SOUTH PROPERTY LINE; THENCE SOUTH 88 DEGREES 05 MINUTES 19 SECONDS WEST ALONG THE SAID SOUTH PROPERTY LINE, SAID LINE BEING PARALLEL WITH THE NORTH LINE OF SAID LOT 7 A DISTANCE OF 53.08 FEET; THENCE NORTH 7 DEGREES 02 MINUTES 49 SECONDS EAST 149.93 FEET TO THE GRANTOR'S NORTH PROPERTY LINE; THENCE NORTH 88 DEGREES 05 MINUTES 19 SECONDS EAST ALONG THE SAID NORTH PROPERTY LINE, SAID LINE BEING PARALLEL WITH THE NORTH LINE OF SAID LOT 7 A DISTANCE OF 53.54 FEET TO THE POINT OF BEGINNING.

P.W.
#08-16-200-110