

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGEMENT TO: (Name and Address) **NEW CENTURY BANK** 363 W. Ontario Chicago, IL 60610



Doc#: 0330947329 Eugene "Gene" Moore Fee: \$38.00 Cook County Recorder of Deeds Date: 11/05/2003 01:33 PM Pg: 1 of 8

| | | | OR FILING OFFICE US | |
|---|--|------------|--------------------------------------|------------------|
| DEBTOR'S EXACT FULL LEGA'L NAME - insert only one debtor name (1 | a or 1b) - do not abbreviate or combine names | | | |
| 1a. ORGANIZATION'S NAME | | | | |
| Tb. INDIVIDUAL'S LAST NAME KROL | FIRST NAME VICTOR | J. | NAME | SUFFIX |
| MAILING ADDRESS 020 WEST 19TH STREET | CHICAGO | STATE | POSTAL CODE 60608 | COUNTRY |
| TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORG NIZATION ORGANIZATION INDIVIDUAL | 1f. JURISDICTION OF ORGANIZATION | 1g. ORG | GANIZATIONAL ID #, if an | y X no |
| ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only | dr otor name (2a or 2b) - do not abbreviate or comi | bine names | | |
| 2a. ORGANIZATION'S NAME | 70 | • | | |
| 26. INDIVIDUAL'S LAST NAME HELLESOY | FIRST NAME JONE | MIDDLE | NAME | SUFFIX |
| MAILING ADDRESS 920 WEST 19TH STREET | CHICAGO | STATE | POSTAL CODE 60608 | COUNTRY |
| TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR INDIVIDUAL | 2f. JURISDICTION CT JRGANIZATION | 2g. ORG | GANIZATIONAL ID#, if an | y X N |
| SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO | OR S/P) - insert only one secured party har e (3) or | 3b) | | |
| 3a. ORGANIZATION'S NAME NEW CENTURY BANK, AN ILLINOIS I | | | | |
| 35. INDIVIDUAL'S LAST NAME | FIRST NAME | M.DDLE | NAME | SUFFIX |
| MAILING ADDRESS 363 W. ONTARIO | CHICAGO | STATE | SOSTAL CODE | COUNTRY |
| 363 W. ONTARIO 4. This FINANCING STATEMENT covers the following collateral: SEE COLLATERAL DESCRIPTION IN EXHIBIT ATTACHED I ATTACHED HERETO AND ANDE A PART HEREOF.; Wheth | HERETO AND MADE A PART HEREC | OF.SEE LEG | GAL DESCRIPTION ed later; all access | ions, addition |

replacements, and substitutions relating to any of the foregoing; all re relating to any of the foregoing (including insurance, general intangibles and accounts proceeds)

| 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 [for record] (or recorded) in the REAL [f applicable] 7. Check to REQUEST SEARCH REF | PORT(S) on Debtor(s) All Debtors Debtor 1 Debtor 2 |
| 8. OPTIONAL FILER REFERENCE DATA COOK County Recorder | |
| FILING OFFICE COPY NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98) | Harland Financial Solutions 400 S.W. 6th Avenue, Portland, Oregon 97204 |

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| UCC FINANCING | STATEMENT |
|---------------------|----------------------------|
| FOLLOW INSTRUCTIONS | (front and back) CAREFULLY |

| Α. | NAME & PHONE OF CONTACT AT FILER [optional] | | | | |
|-----|---|--|---------------|---------------------------------------|-------------------|
| B. | NEW CENTURY BANK 363 W. Ontario Chicago, IL 60610 | | | | |
| | | | PACE IS FO | OR FILING OFFICE US | E ONLY |
| 1. | DEBTOR'S EXACT FULL LECAL, INAME - insert only one debtor name (1a of 1a, ORGANIZATION'S NAME | or 1b) - do not abbreviate or combine names | | <u> </u> | |
| | III. URGANIZATION S INAME | | | | |
| OR | 1b. INDIVIDUAL'S LAST NAME KROL | FIRST NAME VICTOR | J. | NAME | SUFFIX |
| 1c. | MAILING ADDRESS 20 WEST 19TH STREET | CHICAGO | STATE | POSTAL CODE 60608 | USA |
| 1d. | TAX ID #. SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION INDIVIDUAL | 1f. JURISDICTION OF ORGANIZATION | 1g. ORG | ANIZATIONAL ID#, if any | NONE |
| 2 | ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only we do a companization's NAME | utor name (2a or 2b) - do not abbreviate or comb | ine names | ₩ , ₩ | |
| OR | 2b. INDIVIDUAL'S LAST NAME HELLESOY | JONE | MIDDLE | | SUFFIX |
| | MAILING ADDRESS 20 WEST 19TH STREET | CHICAGO | STATE IL | POSTAL CODE 60608 | USA |
| 2d. | TAX ID #. SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION DEBTOR INDIVIDUAL | 2f JURISDICTION CF UNGANIZATION | 2g. ORG | GANIZATIONAL ID #, if an | NONE |
| 3. | SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE OF ASSIGNOR 3a, ORGANIZATION'S NAME NEW CENTURY BANK, AN ILLINOIS BA | | 3b) | · · · · · · · · · · · · · · · · · · · | |
| OR | | FIRST NAME | N.IDDLE | NAME | SUFFIX |
| | MAILING ADDRESS 63 W. ONTARIO | CHICAGO | STATE IL | FOSTAL CODE FOSTAL CODE | COUNTRY |
| 5 | This FINANCING STATEMENT covers the following collateral: SEE COLLATERAL DESCRIPTION IN EXHIBIT ATTACHED HEATTACHED HEATTACHED HEREOF.; whether eplacements, and substitutions relating to any of the foregoing (including insurance, general | r any of the foregoing is owned now ing; all records of any kind relating | to any of the | ed later; all accessi | Ulis, auditivits, |

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| 5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER | AG. LIEN NON-UCC FILING |
| DEAL Chapita DEQUEST SEADON SEDONTS) on Debtor(s) | All Debtors Debtor 1 Debtor 2 |
| 8. OPTIONAL FILER REFERENCE DATA | |
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ACKNOWLEDGMENT COPY - NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98)

Harland Financial Solutions 400 S.W. 6th Avenue, Portland, Oregon 97204

0330947329 Page: 3 of 8

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| UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY | | | | |
|---|--|-------------------------------|---------------------------|-------------------|
| A. NAME & PHONE OF CONTACT AT FILER [optional] | | | | |
| B. SEND ACKNOWLEDGEMENT TO: (Name and Address) NEW CENTURY BANK 363 W. Ontario Chicago, IL 60610 | | | | |
| | | ACE IS FO | R FILING OFFICE US | E ONLY |
| 1. DEBTOR'S EXACT FULL LEGAL N'AME - insert only one debtor name (1a o | or 1b) - do not abbreviate or combine names | | | |
| 1a. ORGANIZATION'S NAME | | | | |
| OR 16. INDIVIDUAL'S LAST NAME KROL | FIRST NAME VICTOR | $\overset{\text{MIDDLE}}{J}.$ | NAME | SUFFIX |
| 1c. Mailling ADDRESS 920 WEST 19TH STREET | CHICAGO | STATE | POSTAL CODE 60608 | COUNTRY |
| 1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION INDIVIDUAL | 1f. JURISDICTION OF ORGANIZATION | 1g. ORG | ANIZATIONAL ID#, if any | X non |
| 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only and | otor name (2a or 2b) - do not abbreviate or combin | e names | | |
| 2a. ORGANIZATION'S NAME | | | | |
| OR 25. INDIVIDUAL'S LAST NAME HELLESOY | FIRST NAME JONE | MIDDLE | NAME | SUFFIX |
| 2c. MAILING ADDRESS 920 WEST 19TH STREET | CHICAGO | STATE | POSTAL CODE 60608 | COUNTRY |
| 2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION INDIVIDUAL | 21. JURISDICTION C. SRGANIZATION | 2g. ORG | SANIZATIONAL ID #, if any | Nor 🔀 Nor |
| 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR | R S/P) - insert only one secured party name (3) or 3b |)} | | |
| 33. ORGANIZATION'S NAME NEW CENTURY BANK, AN ILLINOIS B. | ANKING CORPORATION | | | |
| OR 3b. INDIVIDUAL'S LAST NAME | FIRST NAME | N.DDLE | NAME | SUFFIX |
| 3c. MAILING ADDRESS 363 W. ONTARIO | CHICAGO | STATE | SUG10 | COUNTRY |
| 4. This FINANCING STATEMENT covers the following collateral: SEE COLLATERAL DESCRIPTION IN EXHIBIT ATTACHED HI ATTACHED HERETO AND MADE A PART HEREOF.; whether replacements, and substitutions relating to any of the forego relating to any of the foregoing (including insurance, general | r any of the foregoing is owned now thing; all records of any kind relating to | or acquire any of t | cu later, all accessi | ulia, auditivita, |

| 5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR | SELLER/BUYER AG. LIEN NON-UCC FIL | "ING |
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| 6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL [if applicable] 7. Check to REQUEST SEARCH REF | PORT(S) on Debtor(s) All Debtors Debtor 1 Deb | otor 2 |
| 8. OPTIONAL FILER REFERENCE DATA | | |
| Cook County Recorder | Harland Financial Solutions | 04 |
| SEARCH REQUEST COPY — NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98) | 400 S.W. 6th Avenue, Portland, Oregon 9720 | J4 |

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| FOLLOW INSTRUCTIONS (front and back) CAREFULLY | | | | | |
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| A. NAME & PHONE OF CONTACT AT FILER [optional] | | | | | |
| B. SEND ACKNOWLEDGEMENT TO: (Name and Address) | | | | | |
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| NEW CENTURY BANK | 1 | | | | |
| 363 W. Ontario | | | | | |
| Chicago, IL 60610 | | | | | |
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| 1. DEBTOR'S EXACT FULL LECAL NAME - insert only one debtor name (1a | or 1b) - do not abbreviate or combine names | | | | |
| 1a. ORGANIZATION'S NAME | | | | | |
| OR 1b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE | NAME | SUFFIX | |
| KROL | VICTOR | J. | | } | |
| KKOL | | STATE | POSTAL CODE | COUNTRY | |
| 1c. MAILING ADDRESS | CHICAGO | IL | 60608 | USA | |
| 920 WEST 19TH STREET | | | <u> </u> | | |
| 1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORG. NIZATION | 1f. JURISDICTION OF ORGANIZATION | 1g. ORG | 1g. ORGANIZATIONAL ID#, if any | | |
| ORGANIZATION INDIVIDUAL | 1 | | | X NONE | |
| 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one | le les name (2g et 2h) de not abbreviate or comi | oine names | | | |
| | r stor flame (2a of 2b) - do not appreviate of com- | | · · · · · | | |
| 2a. ORGANIZATION'S NAME | | | | | |
| 00 | | MIDDLE | NAME | SUFFIX | |
| OR 2b. INDIVIDUAL'S LAST NAME | FIRST N'AME | IMIDDLE | NAME | 30/17/ | |
| HELLESOY | JONE | | | | |
| 2c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY | |
| 920 WEST 19TH STREET | CHICAGO | IL | 60608 | USA | |
| 2d. TAX ID # SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION | 2f. JURISDICTION OF CAGANIZATION | 2g. ORG | GANIZATIONAL ID#, if an | Y | |
| ORGANIZATION INDIVIDUAL | | 1 | | NONE | |
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| 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO | R S/P) - insert only one secured party num _ (3, or | 3b) | | | |
| 3a. ORGANIZATION'S NAME NEW CENTURY BANK, AN ILLINOIS B | ANKING CORPORATION | Y , | | | |
| OR 3b. INDIVIDUAL'S LAST NAME | FIRST NAME | N DDLE | NAME | SUFFIX | |
| 30. HADIAIDAYE 2 CVOT HAVAIE | | 4 | | | |
| | CITY | STATE | POSTAL CODE | COUNTRY | |
| 3c. MAILING ADDRESS | CHICAGO | | 60610 | | |
| 363 W. ONTARIO | CITICAGO | | 30010 | | |
| 4. This FINANCING STATEMENT covers the following collateral: | | | · C'A | | |
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| replacements, and substitutions relating to any of the lored | sing: all records of ally killu relating | to ally of t | ne toregoing; all pi | oceeus | |
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| 5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR | SELLER/BUYER | AG. LIEN | NON- | UCC FILING |
|--|---------------------------------|-----------------------------------|----------|------------|
| ATTERNATIVE DESIGNATION (I application) This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL [if applicable] This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL [if applicable] This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL [if applicable] | PORT(S) on Debtor(s) [optional] | All Debtors | Debtor 1 | Debtor 2 |
| 8. OPTIONAL FILER REFERENCE DATA | | | | |
| (ook) County Recorder | | | | |
| CTATEMENT (FORM LICCA) (REV. 07/29/98) | Harland Finar 400 S.W. 6th | cial Solutions Avenue, Portlar | d, Orego | n 97204 |

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| NAME & PHONE OF CONTACT AT FILER [optional] | | | |
|--|--|---|---------------------|
| SEND ACKNOWLEDGEMENT TO: (Name and Address) | | | |
| NEW CENTURY BANK 363 W. Ontario Chicago, IL 60610 | | | |
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| | | /E SPACE IS FOR FILING OFFICE | USE ONLY |
| DEBTOR'S EXACT FULL LEGA': N.ME - insert only one debtor name (1a. ORGANIZATION'S NAME | Ta or Tb) - do not appreviate or combine harnes | | , |
| R 16 INDIVIDUAL'S LAST NAME KROL | FIRST NAME VICTOR | MIDDLE NAME J. | SUFFIX |
| c. MAILING ADDRESS 920 WEST 19TH STREET | CHICAGO | STATE POSTAL CODE IL 60608 | COUNTRY |
| d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORG. NIZATION ORGANIZATION INDIVIDITAL | 1f. JURISDICTION OF ORGANIZATION | 1g. ORGANIZATIONAL ID #, if | any X NON |
| ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only contact to the contact to | dr utor name (2a or 2b) - do not abbreviate or c | combine names | |
| 2a. ORGANIZATION'S NAME | | | <u>.</u> |
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| 920 WEST 19TH STREET | CHICAGO | STATE POSTAL CODE 60608 | COUNTRY |
| ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION INDIVIDUAL DEBTOR | 2f. JURISDICTION OF ORGANIZATION | 2g. ORGANIZATIONAL ID #, if | any 🛣 NON |
| B. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGN | NOR S/P) - insert only one secured party name (3 | e or 3b) | |
| 3a. ORGANIZATION'S NAME NEW CENTURY BANK, AN ILLINOIS | BANKING CORPORATION | ON- | |
| 3b. INDIVIDUAL'S LAST NAME | FIRST NAME | M.DDLE NAME | SUFFIX |
| BC MAILING ADDRESS 363 W. ONTARIO | CHICAGO | STA = F STAL CODE IL 60610 | COUNTRY |
| 4. This FINANCING STATEMENT covers the following collateral: | | | <u></u> |
| SEE COLLATERAL DESCRIPTION IN EXHIBIT ATTACHED ATTACHED HERETO AND MADE A PART HEREOF.; whet replacements, and substitutions relating to any of the fore relating to any of the foregoing (including insurance, gene | her any of the foregoing is owned r going: all records of any kind relati | now or acquired later; all accesting to any of the foregoing; all | 5510115, additions, |
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| 5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CCC This FINANCING STATEMENT is to be filed [for record] (or recorded) in the ESTATE RECORDS. Attach Addendum | ONSIGNEE/CONSIGNOR BAILEE/BAILOR REAL 7 Check to REQUEST SEARCH RE ODDITIONAL FEET | SELLER/BUYER AG LIE | |

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EXHIBIT B

DESCRIPTION OF COLLATERAL

- 1. All fixtures and personal property now or hereafter owned by Debtor and attached to or contained in and used or useful in connection with the property described in Exhibit "A" attached hereto (the "Premises") or any of the improvements now or hereafter located thereon, including without limitation any and all air conditioners, antennae, bookcases, cabinets, carpets, coolers, curtains, dehumidifiers, disposals, doors, drapes, dryers, ducts, dynamos, elevators, engines, equipment, escalators, fans, fittings, floor coverings, furnaces, furnishings, furniture, hardware, heaters, humidifiers, incinerators, lighting, machinery, motors, ovens, pipes, plumbing, pumps, radiators, ranges, recreational facilities, refrigerators, screens, security systems, shades, shelving, sinks, sprinklers, screens, stoves, toilets, ventilators, wall coverings, washers, windows, window coverings, wiring, all rerewals or replacements thereof or articles in substitution therefor, and all property owned by Debtor and now or hereafter used for similar purposes in or on the Premises;
- 2. Debtor's right, title and interest in articles or parts now or hereafter affixed to the property described in Paragraph 1 of this Exhibit B or used in connection with such property, and and all replacements for such property, and all other property of a similar type or used for similar purposes now or hereafter in or on the Premases or any of the improvements now or hereafter located thereon;
- 3. Debtor's right, title and interest in all personal property owned by Debtor and used or to be used in connection with the operation of the Frencises by Debtor or the conduct of business thereon, including without limitation business equipment and inventories located on the Premises or elsewhere, together with files, books of account and other records, wherever located;
- 4. Debtor's right, title and interest in and to any and all contracts now or hereafter relating to the Premises and executed by any architects, engineers, or contractors, including all amendments, supplements and revisions thereof, together with all of Debtor's rights and remedies thereunder and the benefit of all covenants and warranties thereon, and also together with all drawings, designs, estimates, layouts, surveys, plats, plans and specifications prepared by any architect, engineer or contractor, including any amendments, supplements and revisions thereof and the right to use and enjoy the same, as well as all other rights, licenses, permits, agreements and test results relating to construction on the Premises;
- 5. Debtor's right, title and interest in and to any and all contracts now or hereafter relating to the operation of the Premises or the conduct of business thereon, including without limitation all management and other service contracts, and the right to appropriate and use any and all trade names used or to be used in connection with such business;
- 6. Debtor's right, title and interest in the rents, issues, deposits (including security deposits and utility deposits) and profits in connection with all leases, contracts, and other

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agreements with any person or entity pertaining to all or any part of the Premises, whether such agreements have been heretofore or are hereafter made;

- 7. Debtor's right, title and interest in all earnest money deposits, letter of credit rights, proceeds of contract sales, accounts receivable and general intangibles relating to the Premises;
- 8. All of Debtor's rights in and proceeds from all fire and hazard, loss of income and other non-liability insurance policies now or hereafter covering improvements now or hereafter located on the Premises or described in the Mortgage or in this Security Agreement, the use or occupancy thereof, or the business conducted thereon;
- 9. All of Debtor's right, title and interest in all awards or payments, including interest thereon, that may be made with respect to the Premises, whether from the right of the exercise of eminent domain (including any transfer made in lieu of the exercise of said right) or for any other injury to or decrease in volume of the Premises; and
 - 10. All proceeds from the sale, transfer or pledge of any or all of the foregoing property.

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EXHIBIT A

Legal Description

LOT 67 IN BLOCK 1 IN MOORE'S SUBDIVISION OF THE EAST 1/2 OF THE NORTHWEST 1/4 OF SECTION 30, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN No. 17-30-106-006-0000

North Or Colling Clerk's Office Commonly known as: 2147 W. 22nd Place, Chicago, IL 60608