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Doc#: 0331603041  
Eugene "Gene" Moore Fee: \$28.00  
Cook County Recorder of Deeds  
Date: 11/12/2003 03:34 PM Pg: 1 of 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Please Return To:  
**CT CORPORATION SYSTEM**  
 Attn: Susan White  
 208 S. LaSalle Street, Ste. 814  
 Chicago IL 60604

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

OR 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX  
 JAMES THOMAS J. M. D.

1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
 675 WEST NORTH AVENUE, SUITE 200 MELROSE PARK IL 60160 USA

1d. TAX ID # SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any  
 DEBTOR ORGANIZATION INDIVIDUAL 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 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any  
 DEBTOR ORGANIZATION INDIVIDUAL 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

OR 3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX  
 GOTTLIEB COMMUNITY HEALTH SERVICES CORPORATION

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
 701 W. NORTH AVENUE MELROSE PARK IL 60160 USA

4. This FINANCING STATEMENT covers the following collateral:  
 ALL PERSONAL PROPERTY, FURNITURE, FIXTURES, EQUIPMENT, ALL OF THE ACCOUNT'S RECEIVABLE, GENERAL TANGIBLES AND INTANGIBLES, INCLUDING, WITHOUT LIMITATION, PATIENT RECORDS, BUSINESS RECORDS, SERVICE CONTRACTS, TELEPHONE AND TELECOPY NUMBERS, AND GOOD WILL, WHETHER NOW OWNED OR HEREAFTER ACQUIRED, OF DEBTOR'S MEDICAL PRACTICE, INCLUDING ALL PROCEEDS OF THE FOREGOING COLLATERAL.

THE ABOVE GOODS ARE TO BECOME FIXTURES ON THE PROPERTY DESCRIBED ON THE ATTACHED EXHIBIT A.

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

6. The FINANCING STATEMENT is to be filed (for record) in the REAL PROPERTY RECORDS. Attach Addendum (if applicable) Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional) All Debtors Debtor 1 Debtor 2

7. ADDITIONAL FEE

8. OPTIONAL FILER REFERENCE DATA  
 IL-COOK COUNTY

597374180-3

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## UCC 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

OR

9b. INDIVIDUAL'S LAST NAME  
JAMES

FIRST NAME  
THOMAS

MIDDLE NAME, SUFFIX  
J.

10. MISCELLANEOUS: IL-COOK COUNTY

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### 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

OR

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

OR

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.

15. Additional collateral description.

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

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Thomas J. James, M.D.  
Suite 206

**LEGAL DESCRIPTION**

**LOT 10 AND THAT PART OF LOT 9 DESCRIBED AS FOLLOWS:**

**TRACT (a) COMMENCING AT THE POINT OF INTERSECTION OF THE WEST LINE OF SAID LOT 9 AND THE NORTH LINE OF NORTH AVENUE AS WIDENED BY INSTRUMENT RECORDED DECEMBER 18, 1929 AS DOC. NO. 10556872; THENCE NORTH 00° 11' 11.7" WEST ALONG THE WEST LINE OF SAID LOT 9, A DISTANCE OF 492.525 FEET FOR A POINT OF BEGINNING OF THE TRACT TO BE DESCRIBED HEREIN, CONTINUING THENCE NORTH 00° 11' 11.7" WEST ALONG THE WEST LINE OF LOT 9, THENCE SOUTH 88° 41' 07.5" EAST, A DISTANCE OF 22.227 FEET; THENCE SOUTH 01° 17' 31.9" WEST, A DISTANCE OF 96.114 FEET; THENCE SOUTH 88° 55' 34.7" WEST, A DISTANCE OF 134.393 FEET TO THE POINT OF BEGINNING, ALSO TRACT (b) COMMENCING AT THE POINT OF INTERSECTION OF THE WEST LINE OF SAID LOT 9 AND THE NORTH LINE OF NORTH AVENUE AS WIDENED BY INSTRUMENT RECORDED DECEMBER 18, 1929 AS DOCUMENT NO. 10556872L; THENCE NORTH 00° 11' 11.7" WEST ALONG THE WEST LINE OF SAID LOT 9, A DISTANCE OF 688.367 FEET FOR A POINT OF BEGINNING TO THE TRACT TO BE DESCRIBED HEREIN, CONTINUING THENCE NORTH 00° 11' 11.7" EAST ALONG THE NORTHEASTERLY LINE OF LOT 9 (BEING ALSO THE SOUTHWESTERLY LINE OF THE RIGHT OF WAY OF M.S.T.P. & S.S.T.M. R.R.) A DISTANCE OF 270.099 FEET; THENCE SOUTH 45° 59' 07.2" WEST, A DISTANCE OF 259.216 FEET TO THE POINT OF BEGINNING.**

Commonly known as: 675 W. North Avenue, Melrose Park, Illinois 60160