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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY **6705140 40F4**

A. NAME & PHONE OF CONTACT AT FILER (optional)
BUSINESS BANKING DEPARTMENT EV-

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**CHARTER ONE BANK, N.A.
 1215 SUPERIOR AVENUE
 CLEVELAND, OHIO
 44114**



Doc#: **0333849017**
Eugene "Gene" Moore Fee: \$28.00
Cook County Recorder of Deeds
Date: 12/04/2003 08:17 AM Pg: 1 of 3

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 **ANDERSON** FIRST NAME **MARK** MIDDLE NAME **W.** SUFFIX

1c. MAILING ADDRESS **17 W. 181 SCHEEL DRIVE** CITY **HINSDALE** STATE **IL** POSTAL CODE **60527** COUNTRY **USA**

1d. TAX ID# SSN OR EIN ADD'NL INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION **INDIVIDUAL** 1f. JURISDICTION OF ORGANIZATION **ILLINOIS** 1g. ORGANIZATIONAL I.D.#, if any **NONE** 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'NL INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL I.D.#, 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 **CHARTER ONE BANK, N.A.**

OR

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

3c. MAILING ADDRESS **1215 SUPERIOR AVENUE** CITY **CLEVELAND** STATE **OH** POSTAL CODE **44114** COUNTRY **USA**

4. This FINANCING STATEMENT covers the following collateral:

All personal property of the Debtor respecting that certain parcel of land and the structures and improvements now or hereafter thereon located, as more particularly described in Exhibit A attached hereto (the "Property"), together with: (i) all rights now or hereafter existing, belonging or pertaining thereto; (ii) all goods, furniture, machinery, equipment, fixtures, accounts, contract rights, documents, instruments, proceeds of insurance, general intangibles and other items of personal property of the Debtor or in which it has an interest, now owned or hereafter acquired, that are located on or used in connection with the Property and any substitutions, replacements, accessions and proceeds of any of the foregoing; (iii) all judgments, awards of damages and settlements hereafter made as a result or in lieu of any taking respecting the Property; (iv) all of the rights and benefits of Debtor under any present or future leases and agreements relating to the Property, or the use or occupancy thereof together with any extensions and renewals thereof; and (v) all contracts, permits and licenses respecting the use, operation or maintenance of the Property.

Property Address: 2320 Walnut, Blue Island, Illinois 60406

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 file (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA

TO BE FILED WITH: COOK COUNTY RECORDER/ILLINOIS SECRETARY OF STATE

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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

FIRST NAME

MIDDLE NAME, SUFFIX

ANDERSON

MARK

W.

10. MISCELLANEOUS:

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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:

Lot 1 and the East 3 Feet of Lot 2 in the subdivision of Lot 8 in Block 4 in Wattles Addition to Blue Island in Section 31, Township 37 North, Range 14 East of the Third Principal Meridian, in Cook County, Illinois.

2320 Walnut
Blue Island, Illinois 60406
PIN: 25-31-103-029

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

16. Additional collateral description:

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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List of Filing Locations

RA9Form

Illinois

Illinois

Status

Obligor Information:

Name of Obligor: Mark W. Anderson

Type of Entity: individual

OBLIGOR STATE IL

BANK STATE OH

NationalFinancingStatement

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