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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY
A NAME & PHONE OF CONTACT AT FILER (optional)
LOU RIGGS
B. SEND ACKNOWLEDGMENT TO: (Name and Address)

CITIBANK, FSB
500 W. MADISON, REG, 5TH FLOOR
CHICAGO, ILLINOIS 60661
LOAN NUMBER: 02-8204893 (O'LEARY)

Doc#: 0333802157 Eugene "Gene" Moore Fee: \$30.00 Cook County Recorder of Deeds Date: 12/04/2003 10:54 AM Pg: 1 of 4

| | | | | THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY | | | |
|------------------------------|--|-------------------------------------|--------------------------|---|---------------------------------------|-------------|---------|
| 1. DEBTOR'S EXACT FU | ILL LEGAE NAMI | E - insert only one debtor name (1a | or 1b) - do not abbrevi | iate or combine names | | | |
| 1a. ORGANIZATION'S NA | . — | | | | | | **** |
| | | PYSIDE, #03-2591 DA | TED 11/10/03 | | | | |
| OR 16 INDIVIDUAL'S LAST N | IAME | | FIRST NAME | | MIDDLE | NAME | SUFFIX |
| 1c. MAILING ADDRESS | | | CITY | · · · · · · · · · · · · · · · · · · · | STATE | POSTAL CODE | COUNTRY |
| 6734 JOLIET ROA | D | | COUNRTY | 'SIDE | IL | 60525 | USA |
| 1d. TAX ID #: SSN OR EIN | ADD'L INFO RE | 1e. TYPE OF ORG ANIZA" ION | 1f. JURISDICTION | OF ORGANIZATION | 1g. ORGANIZATIONAL ID #. if any | | |
| | DEBTOR BANK | | ILLINOIS | | · · · · · · · · · · · · · · · · · · · | | |
| 2. ADDITIONAL DEBTOR | S EXACT FULL | LEGAL NAME - insert only one | lebtor name (2a or 2b) | - do not abbreviate or combine na | ames | | |
| 2a ORGANIZATION'S NA | | | | | | | |
| | | • | | | | | |
| OR 20 INDIVIDUAL'S LAST NAME | | FI (ST NAME | | MIDDLE NAME | | SUFFIX | |
| l | | | 0. | | | | |
| 2c MAILING ADDRESS | | | CITY | | STATE | POSTAL CODE | COUNTRY |
| | | | 9, | O _x | | | |
| 2d TAX ID#: SSN OR EIN | ADD'L INFO RE 2e. TYPE OF ORGANIZATION | | 2f. JURISDICTION | OF JRF ANIZATION | 2g. ORGANIZATIONAL ID #, if any | | |
| | ORGANIZATION DEBTOR | İ | | | 1 | | NONE |
| 3. SECURED PARTY'S | NAME (or NAME | of TOTAL ASSIGNEE of ASSIGNOR | R S/P) - insert only one | secured part, name (3 / or 3b) | | | |
| 3a. ORGANIZATION'S NA | AME | | | | // | | |
| CITIBANK, FS | В | | | C/A | | | |
| OR 3b. INDIVIDUAL'S LAST I | NAME | | FIRST NAME | | MIDDLE | NAME | SUFFIX |
| | | | | * | | | |

CHICAGO

500 WEST MADISON, 5TH FLOOR, REG
4 This FINANCING STATEMENT covers the following collateral:

3c. MAILING ADDRESS

TICOR TITLE INSURANCE

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF



ILL

POSTAL CODE

6)661

COUNTRY

USA

| 5. ALTERNATIVE DESIGNATION (if applicable) | lel: LESSEE/LESSOR | CONSIGNEE/CONSIGNOR | BAILEE/BAILOR | SELLER/BUYER | AG. LIEN | NON-UCC FILING |
|--|--------------------|-----------------------------|-------------------|--------------------|-------------|-------------------|
| 6 This FINANCING STATEMENT is to be | | in the REAL 7. Check to REC | UEST SEARCH REPOR | RT(S) on Debtor(s) | All Debtors | Debtor 1 Debtor 2 |
| ESTATE RECORDS. Attach Addens | dum | [if applicable] [ADDITIONAL | ree | [optional] | | |
| 8 OPTIONAL FILER REFERENCE DATA | 00.000.000 | | | | | |
| (| 02-8204893 | | | | | |

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| UCC FINANCING STATE FOLLOW INSTRUCTIONS (front and ba | | | | |
|--|--|--|--|---------------|
| 9. NAME OF FIRST DEBTOR (1a or 1 9a. ORGANIZATION'S NAME | b) ON RELATED FINANCING ST | ATEMENT | | |
| STATE BANK OF COUN | TRYSIDE, #03-2591 DAT | ED 11/10/03 | | |
| 96. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME, SUFFIX | | |
| i. 10. MISCELLANEOUS: | | <u> </u> | | |
| | | | | |
| | | | HE ABOVE SPACE IS FOR FILING OF | FICE USE ONLY |
| 11 ADDITIONAL DEBTOR'S EXACT | FUL LF.GAL NAME - insert only one | name (11a or 11b) - do not abbreviate or | combine names | |
| 11a. ORGANIZATION'S NAME | | | | |
| OR 110, INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE NAME | Tsuffix |
| | | | | |
| 11c. MAILING ADDRESS | 0 | CITY | STATE POSTAL CODE | COUNTRY |
| ORGANIZAT | RE 11e. TYPE OF ORGANIZATION | 111. JURISDICTION OF ORGANIZATION | ON 11g. ORGANIZATIONAL ID #, ii | , , |
| DEBTOR | | | | NONE |
| 12. ADDITIONAL SECURED PAI 12a. ORGANIZATION'S NAME | RITS or ASSIGNORS/P | S N. MF - insert only <u>one</u> name (12a o | r12b) | |
| OR 12b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE NAME | SUFFIX |
| 12c. MAILING ADDRESS | | ату | STATE POSTAL CODE | COUNTRY |
| This FINANCING STATEMENT covers collateral, or is filed as a fixture filing. Description of real estate: | timber to be cut or as-extracte | d 16. Additional collateral description | 74 | |
| | | | OFFICA | |
| 15. Name and address of a RECORD OW (if Debtor does not have a record interest) | NER of above-described real estate sst): | | | |
| | | 18. Check only if applicable and ch Debtor is a TRANSMITTING UT Filed in connection with a Man | tee acting with respect to property held in trust neck <u>only</u> one box. | |

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EXHIBIT A

All improvements of every kind and description now or hereafter erected or placed on the Premises (as described in Exhibit B) and all materials intended for construction, reconstruction, alteration, and repairs of such improvements now or thereafter erected thereon, all of which materials shall be deemed to be included within the Premises immediately upon the delivery thereof to the Premises, and all fixtures, furniture, furnishing, goods, chattels and equipment now or thereafter owned by Debtor and attached to and used in connection with the Premises. including but not limited, to all heating, air-conditioning, appliances, sprinklers, lighting and electrical generating equipment, conduits, plumbing and plumbing fixtures, fire prevention, fire extinguishing and ventilating apparatus, elevators, shades, awnings, screens, storm doors and windows, gas and electrical fixtures, partitions, built-in inirrors, and all additional thereto and renewals, replacements thereof or articles in substitution therefor, whether or not the same are or shall be attached to any buildings comprising the Premises in any manner, it being understood and agreed that, except as expressly provided above, the provisions of this Financial Statement shall not apply or attach to any trade fixtures or personal property or Demor or any tenant of the Premises:

Together with all equipment of every kind and description now or hereafter owned port.

Cont.

Co by Debtor and located at: 3709-11 N. Southport Ave., Chicago, Illinois 60613

Loan #:02-8204893

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EXHIBIT "B"

#02-8204893

LOTS 23 AND 24 IN BLOCK 5 IN MILLER'S SUBDIVISION OF BLOCKS 5 AND 6 OF EDSON'S SUBDIVISION OF THE EAST 1/2 OF THE NORTHWEST 1/4 OF SECTION 20, TOWNSHIP 40 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

14-2.

14-20-1

COOPERATE OF COUNTY CLERT'S OFFICE P. I. N. 14-20-115-041-0000 (LOT 23)