

UNOFFICIAL COPY

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY



Doc#: 0402019176
Eugene "Gene" Moore Fee: \$26.00
Cook County Recorder of Deeds
Date: 01/20/2004 04:11 PM Pg: 1 of 2

A. NAME & PHONE OF CONTACT AT FILER [optional]
GreatBank N.A. 847-676-5715

B. SEND ACKNOWLEDGEMENT TO: (Name and Address)

Lexis Document Solutions and
Corporation Service Company
P.O. Box 2969
Springfield, IL 62708

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 SENNO	FIRST NAME AREF	MIDDLE NAME	SUFFIX
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1c. MAILING ADDRESS
3200 ILLINOIS ROAD

CITY WINNETKA	STATE IL	POSTAL CODE 60093	COUNTRY USA
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1d. TAX ID #, SSN OR EIN 393-62-1416	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION INDIVIDUAL	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any	<input checked="" type="checkbox"/> NONE
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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 SENNO	FIRST NAME PAULINE	MIDDLE NAME F.	SUFFIX
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2c. MAILING ADDRESS
3200 ILLINOIS ROAD

CITY WINNETKA	STATE IL	POSTAL CODE 60093	COUNTRY USA
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2d. TAX ID #, SSN OR EIN 388-58-8072	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION INDIVIDUAL	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any	<input checked="" type="checkbox"/> NONE
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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
GREATBANK A NATIONAL ASSOCIATION

OR

3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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3c. MAILING ADDRESS
3300 WEST DEMPSTER STREET

CITY SKOKIE	STATE IL	POSTAL CODE 60076	COUNTRY
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4. This FINANCING STATEMENT covers the following collateral:

All of Debtor's rights, power, privileges and beneficial interest under the Trust Agreement dated the 29th day of June 2001 with Cosmopolitan Bank and Trust successor trustee to Austin Bank of Chicago as trustee to and known as Trust No. 7549 and All Fixtures: whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds)

BOX 314

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

6. This FINANCING STATEMENT is to be filed (for record) (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
L#742680

T 1809306-1

UNOFFICIAL COPY**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
	SENNO	AREF
		MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor 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
			<input type="checkbox"/> 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 3 IN HEANEY'S SUBDIVISION OF LOTS 6 TO 10 BOTH INCLUSIVE, IN BLOCK 2 OF WOLFRAM'S SUBDIVISION OF LOT 8 OF CANAL TRUSTEES' SUBDIVISION OF THE EAST 1/2 OF SECTION 29, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. PROPERTY ADDRESS: 800 WEST DIVERSEY PARKWAY, CHICAGO, IL. 60614 TAX IDENTIFICATION NUMBER 14-29-230-032-0000

16. Additional collateral description:

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

Cosmopolitan Bank and Trust Successor Trustee to Austin Bank of Chicago
801 N. Clark
Chicago, IL 60610

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 for 30 years

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