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### UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) |LexisNexis Document Solutions 801 Adlai Stevenson Drive Springfield, IL 62703 18966283Doc#: 0402331080 Eugene "Gene" Moore Fee: \$28.00 Cook County Recorder of Deeds Date: 01/23/2004 01:13 PM Pg: 1 of 3

	THE ABOVE S	SPACE IS FOR	R FILING OFFICE USE	ONLY
1. DEBTOR'S EXACTFULL FC Al NAME - insertonly one debtor name (1a or 1b)	) - do not abbreviate or combine names			
1a. ORGANIZATION'S NAME				
OR 16. INDIVIDUAL SLASTNAME	FIRST NAME WITILIE	MIDDLE	NAME	SUFFIX
MILLS		STATE	TPOSTAL CODE	COUNTRY
1c. MAILING ADDRESS	CITY	"		USA
802 S. HOMAN	CHICAGO	IL	60624	USA
1d. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORG NIZA, 'ON	1f. JURISDICTION OF ORGANIZATION	1g. ORG/	NIZATIONAL ID #, if any	
ORGANIZATION FSB	IL			NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert c, rue	ebtor name (2a or 2b) - do not abbreviate or comb	ine names		
2a. ORGANIZATION'S NAME	Z-			
OR 2b. INDIVIDUAL'S LAST NAME	FIR ST NAI IE	MIDDLE NAME		SUFFIX
MTLLS	BIRDENE			
2c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
	CHICACO	IL	60624	USA
8 0 2 S HOMAN 2d SEEINSTRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF OF ANIZATION	2g. ORG	ANIZATIONAL ID#, if any	
ORGANIZATION FSB	IL			NONE
3. SECURED PARTY'S NAME (OF NAME OF TOTAL ASSIGNEE OF ASSIGNORS	S/P) - insert only one secured party name (3a or (b)			
3a. ORGANIZATION'S NAME				
OR BANK FINANCIAL F.S.B. 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
OD. REDUKE O D. C. C. C.		114		
3c. MAILING ADDRESS	CITY	S, 41 E	POSTAL CODE	COUNTRY
	BURR RIDGE	ΊL	60527	USA
15 W060 N. FRONTAGE ROAD				

4. This FINANCING STATEMENT covers the following collateral:

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) for Property located at 5001-07 W. Ferdinand Street, Chicago, IL 60644. P.I.N.#16-09-227-036-0000.

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER  6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL if applicable) If applicable (ADDITIONAL FEE) (ADDITIONAL FEE)	110. 212.	NON-UCC FILING Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA 1900028678		

IL-Cook County

LexisNexis Document Solutions 801 Adlai Stevenson Drive

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LLOW INSTRUCTIONS (front and i	Jack) CAREFULLY				
NAME OF FIRST DEBTOR (1a or	1b) ON RELATED FINANCING STATE	MENT			
9a. ORGANIZATION'S NAME					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
MILLS	WILLIE				
.MISCELLANEOUS: IL-COO	k County				
2000					
	CV <sub>A</sub>		THE ABOVE SPACE I	S FOR FILING OFFIC	E USE ONLY
	T FULL LEGAL NAME - insert only one na	me (11a or 11b) - do not abbreviate o	combine names		<del></del> -
11a. ORGANIZATION'S NAME					
11b. INDIVIDUAL'S LAST NAME		FIRSTNAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS		ату	STATE	POSTAL CODE	COUNTRY
C. MPICHTO ADDITICOO		i			
ADD'L INF ORGANIZ DESTOR	ONE INDIVIDUAL TOTAL	11f.JURISDICTIONOF ORGANIZAT	TION 11g. ORG	ANIZATIONAL ID #, if a	ny
ADDITIONAL SECURED PA	ARTY'S or ASSIGNOR S/P'S	NA VIE - insert only one name (12a	or 12b)		
12a, ORGANIZATION'S NAME		0.			
D		TENDOT MALE	MIDDLE	NAME	SUFFIX
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	WIIDDLE	NAME	0017111
2c, MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
3. This FINANCING STATEMENT covers	s timber to be cut or as-extracted	16. Additional collateral descriptio.	-/-		
collateral, or is filed as a fixture f	illing.		10/4		
4. Description of real estate:			4		
LOT 1 AND 2 IN		1			
			0,'		
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SOUTH 1/2 OF TH	SION OF THE HE EAST 1/2 OF		(),	Ox	
SOUTH 1/2 OF THE WEST 1/2 OF	SION OF THE HE EAST 1/2 OF F THE NORTHEAST		(),	0,55.	
SOUTH 1/2 OF THE WEST 1/2 OF 1/4 OF SECTION	SION OF THE HE EAST 1/2 OF F THE NORTHEAST 9, TOWNSHIP 39		(),		
SOUTH 1/2 OF THE WEST 1/2 OF 1/4 OF SECTION	SION OF THE HE EAST 1/2 OF F THE NORTHEAST 9, TOWNSHIP 39		(),	Office	
SOUTH 1/2 OF THE WEST 1/2 OF 1/4 OF SECTION	SION OF THE HE EAST 1/2 OF F THE NORTHEAST 9, TOWNSHIP 39 3, EAST OF THE		(),	Office	
SOUTH 1/2 OF THE WEST 1/2 OF 1/4 OF SECTION NORTH, RANGE 1.3 THIRD PRINCIPAL	SION OF THE HE EAST 1/2 OF F THE NORTHEAST 9, TOWNSHIP 39 3, EAST OF THE L MERIDIAN,		(),		
SOUTH 1/2 OF THE WEST 1/2 OF THE WEST 1/2 OF SECTION NORTH, RANGE 1.5 THIRD PRINCIPAL (EXCEPT RAILRO)	SION OF THE HE EAST 1/2 OF F THE NORTHEAST 9, TOWNSHIP 39 3, EAST OF THE L MERIDIAN, AD), IN COOK		(),	Office	
SOUTH 1/2 OF THE WEST 1/2 OF 1/4 OF SECTION NORTH, RANGE 1.3 THIRD PRINCIPAL	SION OF THE HE EAST 1/2 OF F THE NORTHEAST 9, TOWNSHIP 39 3, EAST OF THE L MERIDIAN, AD), IN COOK		(),	Office	
SOUTH 1/2 OF THE THE WEST 1/2 OF THE WEST 1/2 OF 1/4 OF SECTION NORTH, RANGE 1: THIRD PRINCIPAL (EXCEPT RAILRO) COUNTY, ILLINO	SION OF THE HE EAST 1/2 OF F THE NORTHEAST 9, TOWNSHIP 39 3, EAST OF THE L MERIDIAN, AD), IN COOK IS.		(),	O <sub>FF</sub>	
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SOUTH 1/2 OF THE THE WEST 1/2 OF THE WEST 1/2 OF 1/4 OF SECTION NORTH, RANGE 1: THIRD PRINCIPAL (EXCEPT RAILRO) COUNTY, ILLINO  15. Name and address of a RECORD OF (if Debtor does not have a record into WILLIE MILLS 802 S. HOMAN	SION OF THE HE EAST 1/2 OF F THE NORTHEAST 9, TOWNSHIP 39 3, EAST OF THE L MERIDIAN, AD), IN COOK IS.  WNER of above-described real estate erest):	17. Check only if applicable and o	theck only one box.		or Decedent's E
SOUTH 1/2 OF THE THE WEST 1/2 OF THE WEST 1/2 OF 1/4 OF SECTION NORTH, RANGE 1.5 THIRD PRINCIPAL (EXCEPT RAILRO) COUNTY, ILLINO  15. Name and address of a RECORD OF (iff Debtor does not have a record into WILLIE MILLS	SION OF THE HE EAST 1/2 OF F THE NORTHEAST 9, TOWNSHIP 39 3, EAST OF THE L MERIDIAN, AD), IN COOK IS.  WNER of above-described real estate erest):	Debtor is a Trust or Tru	theck <u>only</u> one box. stee acting with respect to		or∏ Decedent's E
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LOW INSTRUCTIONS (front and b	ack) CAREFULLY				
	1b) ON RELATED FINANCING STA	TEMENT			
9a. ORGANIZATION'S NAME					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
MILLS	WILLIE				
MISCELLANEOUS: IL-COO					
111-COO	Country				
00	) _				
	<u> </u>			CE IS FOR FILING OFFIC	E USE ONLY
	FULL LE'SAL NAME - insert only one	name (11a or 11b) - do not abbreviate or	combine names		
11a, ORGANIZATION'S NAME					
115. INDIVIDUALS LAST NAME		FIRST NAME	MIDO	OLE NAME	SUFFIX
. MAILING ADDRESS		CITY	STA	POSTAL CODE	COUNTRY
			110	ORGANIZATIONAL ID#, if a	nv
ADD'L INFO	O RE 11e, TYPE OF ORGANIZATION	11f. JURISDICTIONOF ORGANIZAT	ION   119.	ORGANIZATIONAL 15 #; " a	, Пион
DEBTOR		10 NATE : 1 NATE : 120 A	- 12h\		
ADDITIONAL SECURED PA	RTY'S or ASSIGNOR S/P	'S NA ME - insert only one name (12a c	or 120)	·	
12a. ONGANIZATION ON SINCE					
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MID	DLE NAME	SUFFIX
				TO INCOTAL CORE	COUNTRY
c. MAILING ADDRESS		CITY	ISIA	TE POSTAL CODE	COOKIN
This FINANCING STATEMENT covers collateral, or is filed as a fixture f     Description of real estate:		d 16. Additional collateral descriptio	10/4		
				Office	
				C	
				C	
15. Name and address of a RECORD Of (if Debtor does not have a record intermediate)	NNER of above-desαibed real estate rest):			C	
15. Name and address of a RECORD O (if Debtor does not have a record inte BIRDENE MILLS	NNER of above-described real estate rest):				
(if Debtor does not have a record inte	NNER of above-described real estate rest):	17. Check only if applicable and c	heck <u>only</u> one box.		or∏ Decedent's E
(if Debtor does not have a record into BIRDENE MILLS 802 S. HOMAN	rest):	Debtor is a Trust or Trus	stee acting with resp		or Decedent's E
(if Debtor doss not have a record inte BIRDENE MILLS	rest):	Debtor is a Trust or Trust  18. Check only if applicable and or Trust or Tr	stee acting with resp theck <u>only</u> one box. ITILITY	ect to property held in trust	
(if Debtor does not have a record into BIRDENE MILLS 802 S. HOMAN	rest):	Debtor is a Trust or Trus	stee acting with resp theck <u>only</u> one box. ITILITY inufactured-Home Tra	ect to property held in trust ansaction — effective 30 years	