Doc#: 0404818073 Eugene "Gene" Moore Fee; \$26.00 Cook County Recorder of Deeds Date: 02/17/2004 11:36 AM Pg: 1 of 2 UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGEMENT TO: (Name and Address) Parkway Bank & Trust Company 4800 N. Harlem Ave. Harwood Heigths, IL 60706 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S EXACT FULL LECAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names 1a ORGANIZATION'S NAME M & D LIMITED PAR INTERSHIP SUFFIX FIRST NAME MIDDLE NAME 1b. INDIVIDUAL'S LAST NAME COUNTRY POSTAL CODE STATE CITY 1c. MAILING ADDRESS 60631 USA ILCHICAGO 6666 N. OLIPHANT 1g. ORGANIZATIONAL ID#, if any 1f. JURISDICTION OF ORGANIZATION 1d. TAX ID #: SSN OR EIN ADD'L INFO RE | 1e. TYPE OF ORCANIZATION ORGANIZATION PARTNERSHIP IL36-4545276 DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only unit abtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME SUFFIX MIDDLE NAME FIRST NAME 2b. INDIVIDUAL'S LAST NAME COUNTRY STATE POSTAL CODE CITY 2c. MAILING ADDRESS 2g. ORGANIZATIONAL ID#, if any ADD'L INFO RE | 2e. TYPE OF ORGANIZATION 2f. JURISDICTION UF ORGANIZATION 2d. TAX ID #: SSN OR EIN ORGANIZATION NONE 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name () a or 3b) ORGANIZATION'S NAME PARKWAY BANK & TRUST CO. SUFFIX 3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME 3c. MAILING ADDRESS STATE POSTAL CODE COUNTRY HARWOOD HEIGHTS IL 69706

4. This FINANCING STATEMENT covers the following collateral:

4800 N. HARLEM AVE.

All inventory, equipment, accounts (including but not limited to all health-care-insurance receivables), chattel paper, instruments (including but not limited to all promissory notes), letter-of-credit rights, letters of credit, documents, deposit accounts, investment property, money, other rights to payment and performance, and general intangibles (including but not limited to all software and all payment intangibles); all oil, gas and other minerals before extraction; all oil, gas, other minerals and accounts constituting as-extracted collateral; all fixtures; all timber to be cut; all attachments, accessions, accessories, fittings, increases, tools, parts, repairs, supplies, and commingled goods relating to the foregoing property, and all additions, replacements of and substitutions for all or any part of the foregoing property; all insurance refunds relating to the foregoing property; all good will relating to the foregoing property; all records and data and embedded software relating to the foregoing property, and all equipment, inventory and software to utilize, create, maintain and process any such records and data on electronic media; and all supporting obligations relating to the foregoing property; all whether now existing or hereafter arising, whether now owned or hereafter acquired or whether now or hereafter subject to any rights in the foregoing property; and all products and proceeds (including but not limited to all insurance payments) of or relating to the foregoing property.

5. ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
This FINANCING STATEMENT is to be filed [for record] (or recorde ESTATE RECORDS. Attach Addendum	d) in the REAL 7. Check to R (if applicable) 7. [ADDITION	REQUEST SEARCH REP (AL FEE)	ORT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA					

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## **UNOFFICIAL COPY**

CC FINANCING STATEMENT ADDENDUM						
DLLOW INSTRUCTIONS (front and back) CAREFULLY NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATE	MENT					
9a ORGANIZATION'S NAME M & D LIMITED PARTNERSHIP						
9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX					
, MISCELLANEOUS:						
POO CON		i				
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70		THE ADONE	OACE I	s FOR FILING OFFI	CE USE ON	ı Y
~/ <u>/</u>				S FOR FILING CITI	JE OOL OIL	
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one de     The Company of the Compa	btor name (11a or 11b) - do no	t abbreviate or combine	enames			
R 11b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	IAME	SUFFIX	Х
				Income conf	COUN	ITDV
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE		
ORGANIZATION	11f URISDICTION OF ORG	ANIZATION	11g. ORG	ANIZATIONAL ID#, if a		Пи
DEBTOR ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NA	ME - i sert only one name (12	a or 12b)		·····		
2. ADDITIONAL SECURED PARTYS of ASSIGNOR S/F3 NA  12a. ORGANIZATION'S NAME	40					
R 12b, INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE I	NAME	SUFFI	IX
125. 115. 115. 115. 115. 115. 115. 115.						
2c MAILING ADDRESS	СІТҮ	~/o	STATE	POSTAL CODE	COUN	11RY
13. This FINANCING STATEMENT covers X timber to be cut or X as-extracted	16. Additional collateral desc	ription:				
collateral, or is filed as a fixture filing.  14. Description of real estate:		2,				
LOTS 73, 74, 75, 76, 77 AND 78 IN MANDELL'S SUBDIVISION OF BLOCKS 1. 2. 3 AND 4 IN PURINGTON AND			0	) 		
SCRANTON'S SUBDIVISION OF THE WEST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 15, LYING NORTH OF BARRY POINT ROAD, IN TOWNSHIP 39 NORTH, RANGE 13,				Tico		
EAST OF THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.				C		
16-15-301-026-0000 16-15-301-042-0000	£					
16-15-301-042-0000						
16-15-301-043-0000						
16-15-301-043-0000 16-15-500-036-0000	<u> </u>					
<ol><li>Name and address of a RECORD OWNER of above-described real estate</li></ol>						
(if Debtor does not have a record interest):						
	17. Check only if applicable	and check only one bo	x.			_
	Debtor is a Trust or	rustee acting with resp	ect to proj	perty held in trust or	Decedent's E	state
	18. Check only if applicable		х.			
	Debtor is a TRANSMITTII		"			
	Filed in connection with a					